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HISTORY OF MECKLENBURG COUNTY MEDICINE

By DR. CHARLES M. STRONG

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HISTORY OF MECKLENBURG COUNTY MEDICINE

BY
DR. CHARLES M. STRONG
CHARLOTTE, N. C.

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Dedicated

To the Mothers Who Bore Us;

Who Suffered, Sacrificed and Prayed for Us;

To the Wives Who Wedded, "Fibbed,"

Answered Calls, Saved and

Lived for Us,

Making it Possible for Us

to be Doctors

C. N. Strong M.D.

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FOREWORD

MY EXCUSES for undertaking this work are: First: My esteemed physicians advised my retirement from active practice.

Second: I have the necessary time.

Third: I have been requested by the Mecklenburg County Medical Society to compile its history.

Fourth: They have given me a splendid corps of collaborators.

Fifth: No such history has been written.

Sixth: A record should be made of such an outstanding body of men.

In attempting this work, I realize my unfitness from a tempermental and scholastic standpoint and would not have accepted the task without the aid of those who are really qualified, but did not have the time.

It has taken time and, to me, has been an effort to write this for which I have been fully compensated. A great historian once said: "The man is to be pitied, after visiting the battlefields of Marathon and Thermopylae, the hill of Golgotha, who does not have his patriotism kindled and his faith strengthened." Thus, in reviewing the medical battlefields and shrines of those who have gone before, and associating with those still on the firing lines, my patriotism to and faith in my profession have been rekindled and strengthened and has made me a happier and better man.

In reviewing the lives of medical men, we are impressed with what might be termed the psychology which sets them apart as a distinct entity from the human family.

First: They become leaders of men because of the prevailing belief of the laity that the study of the human body and mind produces a peculiar occult judgment, not possessed by any other calling.

Second: They are unselfish men because they must necessarily think of others and for others, thus creating tolerance.

Third: They are brave men, face dangers every day, i.e. infections, exposures, etc., which are menaces to their health and life.

Fourth: They are "Minute Men". Emergencies often arise where decision and action must be taken at once. Hence, in any crisis, they are in the forefront.

Fifth: They are sympathetic men. This is often hidden under an apparent stoicism created and made necessary because they see and hear so much to sympathize with. Troubles, when exaggerated, misplace sympathy. They must, therefore, weigh all facts before expressing their feelings.

Sixth: They are cautious and discreet men: they see so many closet skeletons and hear so many personal secrets which they dare not divulge. They develop what might be termed a locked mind, and, for this reason, make for the lawyer and juryman, a poor witness. They must tell the truth and yet, at

the same time, withhold confidences reposed in them by their trusting patients; therefore, they rarely become tattlers.

Seventh: They are preoccupied men; other callings can throw off their burdens, but the conscientious physicians cannot throw off their suffering patients and their supreme responsibilties. No wonder so many have high blood pressure, premature senility, succumb to sudden brain and heart lesions.

Eighth: The are usually improvident men, very few lay by a competency for old age and their family. Many should retire earlier, but cannot for they must carry on in the cold and heat with sleepless nights, at the beck and call of every one, neglecting the financial end, and thus leading a suppressed and slavish life, often dropping suddenly off to a martyr's death. Let us hope they get a martyr's crown.

This kind of life, as said at first, sets them apart as men different and, at the same time, makes them the most honored, respected and loved of all men.

This work is not a one man's book, under their respective sections, others have willingly contributed, which, I am sure, makes it more interesting. I pause here to thank Dr. J. B. Alexander and D. A. Thompkins, although they have passed on, for their histories of Mecklenburg County from which I have quoted freely.

The author and collaborators wish to publicly thank Miss Florence C. Dudley, the society's librarian, who not only did the typing, but also many other

things not in her province with a cheerfulness rarely exhibited; and others, who have contributed sections to this book.

In conclusion, may I quote an old but expressive saw: "Don't view me with a critic's eye, but pass my imperfections by", and ask the readers to borrow, steal or buy the largest mantle of charity they can get and spread it over this volume and its author.

C. M. STRONG.

Charlotte, N. C.,
January 28, 1929.

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"EARLY HISTORY"

ORGANIZED medicine is of comparatively recent date, therefore, not to include them in these sketches, would be unfair to those sturdy pioneers who, on account of distances, bad roads and consequent isolation, did not have the opportunity to organize medical societies and also the other physicians of later date, who, although not members of the Society yet helped to build up medicine.

As a background, let us review some geographical changes in Mecklenburg County. Mecklenburg and other adjoining counties were an original area created by what was known as the Lord Granville Grant from the English Crown in 1762: this included the Tract of North Carolina and eastern districts of Tennessee, under British rule. Out of the Granville Grant, Mecklenburg was created and included Lincoln, Gaston, Union and Cabarrus Counties. Lincoln County was created in 1767, Cabarrus in 1792: Union, Gaston and Mecklenburg (as it now is) in 1846, since which time these counties have remained the same. Therefore, any history of medical men of Mecklenburg prior to this time should include this territory.

We could find no record of any qualified physicians prior to 1746, but did find some so-called nurses and witchcrafters. The latter plied their craft up to and later than 1800, and we find them with us even in this enlightened Twentieth Century, notwithstanding our boasted American civilization, and, strange to say, not confined altogether to the ignorant, but

surreptitiously practicing under different names, even within the medical and allied professions.

John Newman Oglethorpe was the first physician recorded as practicing in the upper part of Mecklenburg County, in 1746.

About the same time, a Dr. Corzen of what is now Lincoln County, is recorded as having received two shillings from Dellinger for services rendered a slave.

Of interest to all Mecklenburgers, either by birth or adoption, is the famed Declaration of Independence of May 20, 1775, and it should be a matter of pride, especially to physicians, to know that Dr. Ephriam Brevard was one of its leading spirits. Dr. Brevard was born in what is now Rowan County (date not obtainable) and later came to Mecklenburg to practice. As a physician, there is no record except that showing that his effects were sold at public auction. It was as a patriot and a prime mover and secretary of the convention that he attained his prominence. He drew up the six immortal resolutions, unanimously adopted, and became a central figure in the stirring times which followed. He, with other leaders, was arrested and placed on a prison ship at Charleston, South Carolina, which was meant for and was proven to have been to many, a death trap. Dr. Brevard languished, dying by inches, until, when released, he was a mere shell. He attempted to make his way home the best he could, going by stages, for he was too sick to go any distance. Finally he reached his home, only to find that his wife had died. His mother nursed him for a short time, when he died of scurvy and malnutrition. Dr. William Reid, chief surgeon

of the Southern Army, located in Charlotte, attended Dr. Brevard during his illness. His resting place is not definitely known, but is probably in the old Presbyterian cemetery, where so many of the patriots lie sleeping in unmarked graves.

The first regular educated physician of the present Mecklenburg County was Dr. Kennedy, who died in 1776. The court house archives of 1772 show that Dr. Ephriam Brevard had accounts against certain estates; of 1773 that Dr. Newman practiced in Hopewell section of the county. The 1777 records show that Dr. Felix Pitts rendered a bill, viz.: "Pectoral Mixture, One Pound—($5.00)", which shows they knew how to charge in those ancient days, as well as in the modern clinic.

Dr. Thomas Henderson, who lived in Charlotte in 1774, was a man of varied gifts—school teacher, exhorter, and practiced medicine as a side line for thirty-six years, being one of the leading citizens.

About the same time was Dr. J. R. Alexander, for whom our own friend and physician was probably named.

Dr. Isaac Alexander, 1782, a teacher in Queen's Museum (now Queen's College) practiced in Charlotte when Dr. Ephriam Brevard's effects were sold at public auction, which was then the custom.

Drs. Isaac Alexander, Thomas Henderson and Dysart were noted as purchasers of his physic and probably comprised the physicians of the county.

In 1770, a virulent epidemic of smallpox swept the county. Dr. Alexander vaccinated ten persons with scabs, charging One Pound ($5.00 in currency),

which was a depreciated one at that time. A "Mecklenburg" Florence Nightingale volunteered as a nurse throughout this epidemic.

In 1790, among the physicians were William Strain of what is now Cabarrus County, also Alexander Cummings of the upper part of the county. In 1792, Dr. Charles Harris began practicing. He was highly educated, and seems to have left his impress, both as a physician and citizen on his community. The same thing was true of Dr. Alexander and Dr. Henderson, names of honor and esteem with us today.

In 1790 to 1800, Drs. Fredrick Crow, William Morrison, Joseph Alexander, Cyrus Alexander, Joseph Ramsey, grandfather of Joe Alexander and Knox Peterson were the leading physicians. Dr. Joseph Alexander (in 1792) practiced ten miles above Charlotte. He had a very extensive practice and had stopping points about every ten miles where he could see patients and answer calls, an itinerant type, which the times demanded, was monarch of all he surveyed. Drs. John Tifley, Rowan, Samuel Desap of Lancaster, South Carolina, were practicing here about this time. Dr. William Kerr of York County also practiced here, later moving to an adjoining county.

Dr. Charles Harris (of what is now Cabarrus County) was a Revolutionary War Surgeon and practiced principally surgery many years, covering many miles of territory. He was of the rough-and-ready type of his times, and stands out as one of the State's great men.

A Dr. Cromer, who lived in Charlotte about this time, was evidently a fine Latin scholar, as his accounts were full of Latin phrases—"i. e., visits per noctum eodem", etc. What modern medical man would have the temerity to thus render bills? Many of our patients don't seem able to understand them when rendered in plain English, even with a post script with vigorous adjectives.

Due credit for part of the above early history of medicine is given in D. A. Tompkins' History of Mecklenburg. Although a native of South Carolina, he was interested enough in the history of his adopted county to spend his time, money and interest to make public the only history of the county up to that time. He was one of the pioneer individuals who laid the foundation for our present industrial progress. I esteem it a great privilege to have known and worked with him, in a way, to build the present Charlotte Sanatorium—a work in which he was deeply interested. Physicians and citizens sustained a great loss in his untimely death.

Dr. Johnston B. Jones (1814-1887) of Charlotte, was probably the best known and rated physician in North Carolina of his day. He was a man of wide literary culture and of striking personality, as described by his biographers, and was easily the leader of his profession. In 1871, he formed a co-partnership with Dr. Joseph Graham, and later with his son, Simmons B. Jones. It was said that this union was the synonym of professional efficiency.

Back to the doctors of 1815: Dr. McKenzie was a leading Charlotte physician and in 1822 formed a

partnership with Dr. D. T. Caldwell. It was an embryo clinic and, to prevent friction, they agreed to divide the town by Trade Street and each was to practice in his own zone, except in the absence of the other. Mention is made of bleeding to eliminate poison, etc.

Later, Dr. Thomas Dunlap, the Falstaff of the profession, came to Charlotte. Dr. Tom was a very large, fleshy, jovial and popular man. He died in 1863. He was not only a successful physician, but was accredited as the founder of Methodism in this part of the State. Dr. Dunlap and Dr. D. C. Caldwell ran a preceptor school preparing young medicos for medical college. Among the number were Drs. C. J. Fox and Robert Gibbon, the latter a gifted surgeon, father of our own Robert. He and Dr. Fox were the only surgeons in this part of the country. Dr. McIllwaine, who later went to Florida, also practiced here.

Dr. John Mason Strong, 1818-1897, practiced fifty years in Steel Creek section. Dr. J. B. Alexander in his history of Mecklenburg County says: "He served as surgeon in the late war and was considered one of the ablest men professionally in service. His integrity was above question, his piety an example to all, and his ability of the class that made him easily one of the best physicians in the county. He was an all-round man, kept up with the progress of the science, lived to a ripe old age, and was an honor to his profession and adopted county." He left two sons, the author and Dr. W. M. Strong, both of Charlotte. The difficulties of obtaining a finished education at this period were shown by the fact that

he, with two other students, bought horses, rode from Charlotte to Cannonsburg, Pennsylvania, sold their horses, remained there two years, then graduated at Washington Jefferson Literary College in 1847. They made the journey home by the same means. Later, he was among the first in the South to graduate in medicine at Jefferson College, Philadelphia. However, this time, the trip was made by stage coaches.

Thomas Thorne Sandifer (1818-1901), of the Paw Creek section, lived to the ripe old age of eighty-three years. He was prominent as a physician and served as a legislator and as county commissioner. Dr. Sandifer was a devoted churchman.

Dr. Edward Balls Williamson (1819-1870), practiced in Pineville thirty-six years and is described as an aggressive, tireless worker with a peculiar adaptability along obstetrical lines, as is witnessed by the numerous namesakes he left in his wake.

Dr. Robert Morrison Williamson, his son, succeeded him, but for a short while went into the drug business in Shelby, North Carolina and died at forty-five years of age.

Isaac J. Sloan (1820-1889), of Berryhill township, successful physician and farmer, was the father of Dr. Joseph Sloane of Gastonia, who recently died.

Dr. Washington Morrison (1824-1884) practiced for twenty years in Paw Creek township, and was a great admirer of fine horses and was a learned, polished gentleman.

Dr. James Gilmer had an extensive practice six miles above Charlotte for many years but no definite data about him could be obtained.

Dr. Thomas Clairborn Neal was born in Mecklenburg County on November 26, 1826, and was one of Mecklenburg's outstanding physicians. He was an alumnus of the University of North Carolina (1842) and South Carolina and Castleton, Vermont Medical Colleges (1848). His first field was Ebenezer, South Carolina. Six years later, Dr. Neal bought the home and practice of Dr. James Gilmer, six miles North of Charlotte, where he practiced until his death in February, 1901. During the Civil War, he served as surgeon in the hospitals and camp near Richmond. Dr. Neal typified the loyal, sacrificing county physician of the past century. No man ever loved his profession more or was more willing to sacrifice himself for distressed humanity even when he knew there would be no material compensation. Dr. Neal represented the polished educated Southern physician, and upheld the tradition of the Neal name, which has meant so much to this section. This so-called commercialized medical age, which, I am sure is overstressed because of the rapid change of customs, business, etc., appears to make this a more calloused one, yet if I know the minds of our younger physicians, they still have the same high ideals, though less expressed and appreciated, of such men as Dr. Neal and others, who magnified their calling and left us a goodly heritage.

Dr. J. M. Davidson, a man of means and education, with a Chesterfield manner, practiced about this time for the love of his profession, as most of his work was done gratis. The Davidson influence has permeated the intellectual, social, political and religious fabric of Mecklenburg County.

Among the great physicians of Mecklenburg was Dr. Isaac Wilson (1830) of the Rocky River section —a versatile man, who did a large practice, was justice of peace and lay preacher. He had a monopoly of his patients' lives and destiny: brought them into the world, spliced them at the marriage altar, ushered them out of the world, officiated at their burials and was also an expert at the turkey shooting contests. He was indeed and in truth, a versatile man.

Dr. S. B. Watson, a unique character, came on the scene near Matthews section, practiced sixty-seven years, up to within a few days of his death. This is the longest period of practice that I know of. He lived to be ninety odd years old and was typical of the "old school"—rode horseback and didn't believe in the modern inventions of medicine. He called the thermometer, the "Devil's Tooth Pick", and the hypodermic, the "Devil's Squirt Gun." The latter term has not been totally false—its evil among dopers at least somewhat balances its good. He practiced over an area of twenty-five miles, was a noted preceptor and magnified the high calling of his profession.

Dr. William Ardrey of Providence Township did a large practice and was the father of Dr. Joe Ardrey, who practiced until his death in Pineville. The latter inherited many of the princely traits of his father. Dr. William Ardrey was a political, civic and religious force.

Dr. Parks McCombs (1833-1901), an alumnus of Davidson College, University of New York Medical College and a student of Dr. Pinkney Caldwell's pre-

ceptor school, whose name is still a household word in Charlotte, was a noted obstetrician, a man of great ability. Gold mining was his hobby, which, like truth, though crushed to earth would rise again. When he lost in one gold mine venture, he would try another. Probably no physician ever made a deeper impress on his patients and community than Dr. McCombs.

Dr. Isaac W. Herron (1832-1907) practiced in the upper part of Steel Creek township with great success. An attest of the esteem in which he was held by his patients and community, is a marble shaft which stands in Steel Creek church yard. He was the father of Dr. Mack Herron of Charlotte, a member of the Mecklenburg County Medical Society.

James Thomas Kell of Providence township (1834-1910) was a graduate of Southern Medical College. He rose from the office of captain to lieutenant colonel of 30th North Carolina Regiment. During the Civil War, he was severely wounded at Cold Harbor. He served two terms in the legislature and is described by his contemporaries as one of the most lovable of men, careful in dress, polished in manner, sympathetic in nature, of unblemished character, withal an up-to-date physician. The esteem in which his name is still held and spoken of by those who knew him has been excelled or equalled by very few men.

Dr. John Brevard Alexander (1834-1911), was a great grandson of John McKnight Alexander, the signer of the Declaration of Independence. He was a surgeon of the Thirty-Seventh Regiment of North

Carolina, an associate of Dr. Robert Gibbon for a while and later practiced in the City of Charlotte. He was State senator in 1897. After retiring from practice, he became a historical writer of "Biographical Sketches of Hopewell Section", "Reminiscences of the Past Sixty Years", and a "History of Mecklenburg County". From the latter, valuable data has been used in this book. His daughter, Dr. Annie Alexander, was the first woman to practice medicine in the South. Her success demonstrates the fact that a woman is qualified to practice this art, which was doubted by many critics at the time.

Dr. T. J. Walker (1835-1928), familiarly known as "Dr. Jack", a veteran of the Civil War, later studied medicine and began practicing in the Steele Creek section with Dr. I. W. Herron. Later, he located in Huntersville, where he practiced for over thirty years. He was treasurer of the county for eight years and lived to the ripe old age of ninety-three years, dying in November, 1928. Over so long a career, he lived an exemplary life, was noted for his cheerful nature, which brought so much cheer and hope to the bedside and was always the center of attraction in any gathering. Consequently, he had a host of friends. He was of the conservative type of physician and naturally a very successful one. Dr. Jack's influence of optimism will long live in the memory of his many friends. He was the father of the late Dr. Charles E. Walker, who inherited his father's traits and who will be further mentioned in the Mecklenburg County Medical Society's records, as one of its presidents.

Dr. Joseph Graham (1837), of the noted Graham Battery which was often cited for valor in the Civil War, practiced in Charlotte (after the war) most successfully. He also took a great interest in all affairs of the city and State and served on the city council. He is described as a handsome, energetic, public-spirited citizen. His son, Dr. William Graham of Charlotte, now retired, practiced successfully to a select clientele for many years.

Dr. W. P. Craven, A. B. Trinity College, born in 1845, is still practicing in Long Creek township at the ripe old age of eighty-four years. He was a soldier in Ranson Brigade and has been in practice fifty-five years and, although somewhat feeble in body, is still robust in mind. He is a splendid representative of the fast-vanishing general practitioner, who has served his generation as a citizen and physician above the ordinary. Has two sons following in his footsteps, Dr. William Craven of Charlotte, and Dr. Thomas Craven of Huntersville.

Dr. F. O. Hawley (1846-1915), Edinboro graduate, Civil War soldier and a Scotchman, every whit, came to Charlotte in 1908 where he served faithfully and well as City Physician until his death in 1915. Dr. Hawley was patriarchal in appearance, with a long flowing beard. Driving two Shetland ponies, he was a familiar and striking character on our streets, and he unceasingly attended the poor, even getting out of a sick bed to answer calls, thus spending his life for others.

Back in the "forties," about 1847, Mecklenburg doctors were evidently of plain dress and equipage.

One Dr. Rosseau Duke Park, fresh from "Old Erin," is recorded as dressing in princely style, riding in a two-horse buggy, horses harnessed tandem, with negro driver and pet squirrel playing around his shoulders and arms. This was the acme of Eighteenth Century publicity. What returns this brought him, we are not told—no board of censors then.

John Knox (1850-1911), A.B. Davidson, M.D. Charleston. As his name implies, he was a Scotchman and a Calvinist, a diligent Bible student and was noted for his knowledge of that Book. He rarely left home and practiced in lower Steel Creek for thirty-two years with a fidelity rarely excelled. A son, John, Jr., is practicing in Lumberton, North Carolina.

Lester Walker Hunter, born in 1853, an alumnus of Erskine College and Bellevue Medical College, is still practicing in the Sardis section, at the age of seventy-six years. He is one of three physicians in the county outside the incorporated towns and is a man of sterling character and without doubt a beloved physician.

Dr. Herman Sadelson was born in New York in 1854. He came to Southern Pines for his health, which was much improved while there. Then, he took up his practice in Charlotte in 1907 as a dermatologist until his death in 1919. Although frail of body, he was a regular attendant of the society meetings and, at various times, contributed papers that commanded attention and showed deep, thorough work in their preparation. Dr. Sadelson was an upright Christian man.

Dr. J. I. Rone (1855-1899) practiced in Pineville six years, later he moved to Missouri, where he died. He was noted as a great typhoid fever specialist and his record published after a severe epidemic of this malady showed that he had treated 571 cases with a mortality of seventeen cases—not equalled up to that time, and his treatment was essentially that of today, feeding and bathing.

Dr. William Haines Wakefield (1855-1929), a Canadian by birth, came to Charlotte in 1895, where he specialized in eye, ear, nose and throat. Dr. Wakefield retired from active practice, and for several years lived among his flowers, from the culture of which he derived both pleasure and profit. A visit to his hot house and gardens would convince one of his genial, aesthetic nature and that "he lived by the side of the road, and was a friend to man." Dr. Wakefield passed away, August 12, 1929.

Dr. Francis M. Winchester (1857-1917), was born in Union County, graduated at Jefferson Medical College in 1880, and came to Mecklenburg in 1890. He spent three years at Hickory Grove, and fourteen in Charlotte, where he served two terms as county physician. Dr. Winchester was a large commanding-looking man of genial disposition and was popular alike with the public and his fellow physicians.

Dr. Charlie Gustavus McManaway (1855-1918), came to Charlotte from Virginia in 1888, practicing for thirty years here. He was a "live wire", could see more patients a day, probably excepting Miller Gallant, our present-day dynamo, than any physician I ever knew, and he was always the first man in

any emergency. Withal, he was a most lovable man of the cheerful type.

Dr. Arthur S. Grier was born in Sardis community, Mecklenburg County in 1858. Graduate of University of Maryland in 1883. Dr. Grier located at Pineville, practicing there until his death in 1895, with much success, although handicapped by a progressive chronic disease, which would have incapacitated a less determined man.

Dr. Samuel Johnson Alexander, west of Pineville, was a surgeon during the Civil War, practicing several years. He was above the average man and died early in life from diphtheritic infection of the hand, before the days of antitoxin.

Dr. D. O'Donoghue practiced in Charlotte 1878 to 1900, was Irish born, bred and educated, and was a successful practitioner and prominent in civic and religious matters. He was Irish from his toes up, and was a member of the first Medical Society in the county (The Charlotte Academy of Medicine) of which, up to the present writing, no minutes of its transactions have been found.

Dr. R. J. Brevard came to Charlotte in 1882 and practiced until his death. His biographer says of him: "An astute politician, mayor of city; took an unusual interest in the material interests of the city; socially was a great favorite; suave and affable in his manners; a man of forceful will power, subordinated by a wise and generous discretion."

Dr. J. Wellington Byers came to Charlotte in 1883. He was a former newspaper man, dramatist and scholar, yet withal, a fine doctor and surgeon. He

later left here on account of his health, and there is no record of when and where he died, but it is known that he has passed on. His versatile accomplishments made him a very interesting man.

Dr. J. S. Lafferty practiced at Davidson College from 1886 to 1890, moving to Concord to practice. He was the father of Dr. R. H. Lafferty of Charlotte. He was of a retiring nature, which did not hide the nobility of his character, nor dim the beauty of his life.

Dr. Bratton (unable to ascertain his initials, or date of his birth) practiced in Charlotte between the sixties and eighties. He had an office on the Wilder corner and was a man of aristocratic birth, finished education and fine appearance, which made him prominent not only as a physician, but also as a citizen. He was the first regular elected county physician, as far as it can be determined. Later Dr. Bratton moved to Yorkville, where he died.

Dr. Gregory (also unable to ascertain his initials, or date of his birth) likewise practiced in Charlotte between the sixties and eighties, being a contemporary of Dr. Bratton's and he stood out as one of the unique characters of his time. He was noted for his wit and aphorisms, which are quoted on our streets today. He would have, in this day and time, been pronounced a psychoanalyst. One of his stunts was to use a Ferguson cylindrical speculum (which had just come out), through which he looked the whole body over, of either sex; which very much impressed and added to his clientele. He subverted this instrument from a sacred to a profane use. His advice to a physician who was looking over the Charlotte field with a view

to locating would be apropos today to the many doctors who consider Charlotte a mecca. He said: "I have been practicing here for several years and if I had not had a cow and chickens, would have starved to death. If you have these two essentials come along." He told this incident on himself: An old country darkey came to consult him, who had flying pains over his body, which had persisted in spite of the usual remedies. He told the doctor that he had been tricked, and said that if the doctor would treat him for that he would get well. To this the doctor assented and told the old darkey to come back to his office in a few days. In the meanwhile, the doctor got a lizard (a live one), had the old darkey lie on his face and said that he (the doctor) would run the trick out of him. After doing some magic over the patient's body, the doctor chased the spirit to the calf of his leg ,which he then grasped vigorously and said that he had the "son of a gun," and commanded the old darkey to lie still while he cut it out. After making a slight incision, the lizard was presented to the patient, and the pains immediately and permanently ceased (so far as the doctor ever knew). The doctor then collected from his patient at that time, the staggering fee of ten dollars, which was cheerfully paid. Query: Has the modern physician forgotten this art?

Dr. James Sylvanus Bell (Sharon) (1857-1890), M.D., University of Maryland 1886, practiced in Matthews until his death. Dr. Bell was of that cheerful enthusiastic type which endeared him to his friends and patients. He was a personal friend and

room-mate of the author and always called me "son"; took me under his wing; kept the bad boys off. Dr. Van, as he was affectionately called, was a prince, and left a fragrant memory behind him. Over such a short period, few young men have built up such an extensive practice.

The Renaissance of Medicine seems to have appeared in the period of 1840 to 1860, especially in surgery. It was in 1845 that ether was discovered. We are familiar with wood cuts of Ambroise Pare's time, where we have depicted surgical operations in which the patients were tied down, mouth muzzled and the surgeon, with a hot piece of iron, doing amputations, etc.

Prior to 1845, a more humane method was employed. The patients were held down and were given decoctions and lethargic doses of whiskey. The latter anaesthetic probably accounts for their indifference or willingness to undergo the ordeal.

The surgeons of today, with their scientific technique, can but marvel at their results. We read of laparotomies, Caesarian sections, kidney and bladder stones removed, and brain surgery, all being successfully performed. Their results are partially explained, perhaps, by the greater resistance of the pioneers, less virulence of pus germs; or Madam Coccus and Mr. Bacillus had not found out their real strength.

During this period, medicine emerged from the dark ages of superstition, witchcraft and bigotry and gave way to a more enlightened position among the

learned professions. It was during this time that some of our greatest physicians lived.

This advance was halted by the Civil strife, which almost wiped out our civilization, especially in the South. Phoenix-like, she has arisen from the ashes and medicine, with all other sciences, is making wonderful progress. This probably accounts for the growth of specialism as the field of medical science has so broadened it would take a super-mind to encompass the whole.

The number of physicians have increased at such a rapid rate that we find it inexpedient to continue individual biographies except in connection with any proceedings which were of medical interest. In the proceding sketches, we have tried to include all physicians who have practiced any length of time in this County and up to the formation of the Mecklenburg Medical Society and, if any have been overlooked, it was not because we did not try to get some record of them. We, however, append in the chapter "In Memoriam" those who have passed more recently.

MECKLENBURG MEDICINE OF THE NINETIES

This brings us up to the Nineties and we have asked Dr. George W. Pressly, our talented and beloved surgeon, to take the history up to the formation of the present Mecklenburg Society, and you will agree with the writer that the following chapter is spicy and refreshing in a vein peculiarly possessed by its author.

"MECKLENBURG MEDICINE OF THE NINETIES"

By DR. G. W. PRESSLY
CHARLOTTE, N. C.

APRIL, 1929

MECKLENBURG MEDICINE OF THE NINETIES

DURING the last decade of the nineteenth century, the practice of medicine in Mecklenburg County continued to lengthen her cords and strengthen her stakes. The antiseptic method, which was to revolutionize the practice of surgery, had been well established and the time was ripe to change the operating room from the home to the hospital. Laudable pus had become contemptible pus.

St. Peter's Hospital, with six beds, and the Good Samaritan, with eight, had been in operation for sometime, mostly for those who had no other place in which to be treated. Practically all the surgery was done in the home. An operation was quite an event in the life of a busy doctor. It meant a day of preparation, a day of performance, and several days of watchful waiting and high blood pressure.

At the beginning of this period, Charlotte was an important town of some eleven thousand inhabitants. In the county, outside of Charlotte, there were twice as many people. The proportion of doctors was about in the same ratio. The county doctors included: Drs. J. S. Abernathy, H. Q. Alexander, E. C. Boyette, J. Bruner, J. E. Caldwell, W. P. Craven, S. Mc. Crowell, J. Mc. DeArmon, J. J. Dupuy, L. W. Hunter, S. Mc. Henderson, I. W. Herron, J. Mc. Herron, M. C. Hunter, C. S. McLaughlin, Nick Moore, J. P. Munroe, T. C. Neal, W. W. Pharr, T. N. Reid, J. J. Rone, C. M. Strong, W. M. Strong, H. J. Walker, J. M. Wilson, W. H. Wooten.

The roll call of Charlotte would be answered by: Drs. Annie L. Alexander, J. B. Alexander, R. J. Brevard, J. W. Byers, I. W. Faison, Robert Gibbon, R. L. Gibbon, Joseph Graham, Geo. W. Graham, William A. Graham, F. O. Hawley, S. B. Jones, J. Parks McCombs, C. G. McManaway, John C. Montgomery, D. O'Donoghue, E. C. Register, H. M. Wilder, F. M. Winchester.

As the decade wore on, to these city men were added: Drs. J. R. Alexander, E. M. Brevard, A. J. Crowell, J. Mc. Crowell, J. E. S. Davidson, J. R. Irwin, C. S. McLaughlin, W. O. Nisbet, A. I. Petrie, G. W. Pressly, E. R. Russell, C. M. Rakestraw, C. B. Stephenson, C. M. Strong, W. H. Wakefield, A. M. Whisnant, W. T. Woodley.

Transportation was an important item in the practice of medicine then, as it is now, and the doctor spent a good part of his time in the buggy or saddle, which included a horse or two (explanation for the benefit of next generation).

About this time came the macadam road, which was to cause Mr. Henry Ford to turn over a few times in his dreams. Then the rubber-tired buggy and the safety-bicycle began to lessen the daily jolts of the doctor. Mr. Latta unhitched the front of the street cars and put in electricity and there were electric lights on every other corner, except on moonshiny nights.

The city began to feel her oats. A new city hall was built at the corner of Fifth and North Tryon Streets, and the Court House was moved from Church and West Trade Streets to South Tryon and

Third Streets, and the water works' pond was moved from where the new armory building is across town to the Statesville road on Irwin's Creek. The post-office and the First Presbyterian Church were where they are now. But the change was perceptible throughout the entire county. No new gold mines were opened up, but there were several kept open out-of-town and some very near the city limits. While there had been no gold rush to Mecklenburg, a few of the doctors, with that business foresight so characteristic of our profession, had invested a certain amount in these promising excavations. In recent days some of these mines are being sold for building lots at a good price.

With all this stir upon the ground and underneath it, the doctors began to move to Charlotte along with a lot of other folks. It soon became a no uncommon sight to see a perfect stranger pass the square going east.

There were three drug stores on this historic spot, and three others within the block. Around each of these points, a galaxy of doctors revolved in a more or less regular orbit. Some shone with a greater brilliancy, of course, than others and stopped more on the main streets, or swung out more into the surrounding country, but all revolved to some extent. The well-established physician, and even the fellow who only hoped to be, usually wore a long Prince Albert and a silk topper, and drove a quick-starting horse that was hard to hold. In these days there were no traffic cops and, as generally the call was urgent, it was customary to cross the Square at full

speed, in high, averaging some eight miles per hour.

The esprit de corps was very strong and there was a very friendly spirit shown the newcomer. He would be invited to ride out on the edge of town to see an interesting charity case, or he might go out in the country to help in an operation and incidentally pick up a very splendid dinner. Occasionally there might be a warning suggestion of slight overcrowding, but it was not prompted by a desire to discourage the late-comer, but rather to lessen the disappointment of later years. The new men were first called on to give an anesthetic at the Good Samaritan, or to answer a cold night call to the Brick Row. Later on, they dropped chloroform at St. Peter's and when they moved up to giving ether in a private home on Trade or Tryon Street, the future burst into a rosy dawn. One of these new fellows accompanied an established Charlotte man down to Anson County to give an anesthetic for an abdominal operation for tumor. It was an all-day trip, left early and came back late as per schedule on the Seaboard. The young man got his expenses and fifteen dollars and felt like the Psalmist when he said: "My cup runneth over". He was able to pay his board and room bill for two weeks, and send his girl a bunch of artificial violets. These were the days when a nickel would buy a pack of cigarettes and a leading bank boasted of a $27,000.00 surplus.

The Charlotte Medical Society held regular monthly meetings in the assembly room of the new city hall. The young doctors were cordially received and encouraged to read papers on any subject what-

soever, even if remotely related to the field of medicine. The meetings were opened with the roll call and absent members were fined twenty-five cents. They were appointed alphabetically to read papers, two for each month and fined one dollar for not reading. Very often a paper was read which was worth the money. At other times, the society would be out the dollar.

In these halcyon days, the specialists began to cut their milk teeth. In fact, the eye, ear, nose and throat man was well-established and did a thriving office practice. The rest of the men did everything else that came to hand, especially general surgery and throat work.

Every doctor was a "Physician and Surgeon" according to his letter heads and prescription blanks. To admit that one could not operate, was to lose all standing among the laity. Consequently surgery had a spice and variety which is woefully lacking in these modern days of standardization.

With the opening of hospitals, the way was made easy for the specialist in surgery. The obstetrician, fresh from the Sloane Maternity, gave a shove to the movement and the real push came from the G-U man, all set from Hopkins. Then came the stomach doctor, which made assurance doubly sure.

Among the many gifts vouchsafed to the man of medicine in this period and possibly the greatest of them all, was the trained nurse. The practical and the impractical nurse had been in vogue quite a while and they served their day and generation to their lasting credit and, in truth, they still do, but the real trained nurse was on her way South.

For ten years before this decade, Dr. R. J. Brevard had been physician in charge of St. Peter's and in 1891, he was succeeded by Drs. R. L. Gibbon and C. A. Misenheimer and these men, by their energy and skill in the following seven years, laid broad and deep the surgical reputation of this growing hospital. In a few years, the beds went from six to twenty and along with it came the training school for nurses. Miss Susan Mott, Miss Effie Ellen McNeill and Miss Alice Anna Powers were the first nurses to be graduated in the grand old County of Mecklenburg. The exercises were held in the Elk's hall on North Tryon Street and, while larger classes have been graduated since then, it is doubtful if a prettier bunch has ever been seen in all these years.

With these wonderful helpers, the specialist soon struck his stride and many a perilous operation was carried through to a happy convalescence. The surgeon was relieved of so much of the care and anxiety of his nerve-racking work that he had time to perfect his technique and keep his books posted, if he kept any. Unfortunately it was still true that in the press and stress of a bloody field that would not stanch, the elusive sponge would get lost in the shuffle, but it was never the fault of the trained nurse. Just how much medicine owes these co-workers along the via dolorosa, we may never know until the books are opened Over There.

In this rapid age, we may be turning out the overtrained or specialized nurse, who, following in the footsteps of her trainers, is limiting her field of

work and usefulness to a too-select class of practice. If so, the practical nurse may again find her field.

Next to the trained nurse, the most momentous happening was the advent of the Roentgen ray. This was first used in this section by Dr. Henry Louis Smith of Davidson College, in a case of Drs. Irwin's and Misenheimer's to locate a foreign body in the throat, which was successfully removed. Soon afterward, Dr E. C. Register put in a machine at St. Peter's. It was a large glass-plate generator and had to be run by hand. Henry, the colored orderly, usually furnished the hand. Often times he had to call in the arm, shoulder, back and side before the picture took good.

Among the first pictures taken was one of Dr. Register's hand, and it showed the ring on his finger to perfection. This was a great advance in our science and changed the doctor's wise-looking at the tongue to a credulous examination of a shadow—not just in one night, of course, but very soon, as time goes in the upward climb of the descent of man.

The operations in vogue were amputations, circumcisions, hemorrhoids, strangulated hernia, D. and C. and tonsillectomy. At times, inguinal glands were confused with hernia, but turned out all right in the end. Occasionally there was an abdominal operation for tumor, or a nephrectomy, but very few had ever looked at an appendix right in the eye and the thyroid was barely mentioned in Gray.

No one suspected what a gold mine lay in the lower right quadrant or how rich the field between the carotids. The benefits of tonsillectomy were well

recognized and almost every doctor had a tonsillotome and could operate before the fire place in a rocking chair, at any time. The rocking chair was very helpful in swinging the uvula out of danger and gave the patient a comfortable sense of freedom.

The usual anesthetic was chloroform on a wad of cotton in a paper cone. Some of the doctors of Asheville had been using ether, but in most of the Southern states, it was considered disloyal to the Confederate cause to use anything but chloroform. Ether caused pneumonia and prolonged nausea and kept one busy pouring it on all the time, and gave little chance to watch the operation. It was thought at that time that ether had been introduced by a New England Yankee, while chloroform was put forward by a British surgeon, who sided with the South. The most brilliant paper read before the Charlotte Medical Society for many years was one comparing the value of these two agents. In this article, the author proved very conclusively by statistics gathered from Sajou's Encyclopedia for 1882 that chloroform was not only safer, but much surer to put the patient to sleep and keep him there. It might not be amiss to quote a paragraph or two from this musty document:

"We have been taught in school and textbook that chloroform is more dangerous than ether, and long rows of figures set down to prove it until we have come to use chloroform with our hearts in our mouth and our mouth in the patient's ear with fear and trembling."

"Most of us were trained in Northern schools and the ether-laden air of the clinical amphitheatre

was a part of our surgical education. We can still recall the sleep-scene on Wednesdays—the slobbering patient, the close-fitting inhaler, the bulky container and how the anesthetist poured it on and called for more until we, first-year men, wondered why they had not soaked him over-night in a tank of ether."

"Here in Charlotte, we may say that chloroform is exclusively used, while ether is only used at times to wash off the site of operation, or to make hot drops at the opening of the apple season."

Instead of being run out of town, the essayist was given the glad hand by quite a few. Where ignorance is bliss, the patient should be wise.

Along with the scientific side of medicine, the society did not neglect the weightier matters of the law. It took up at times, industrial insurance examinations and a delinquent list. After some debate, it was decided that it was beneath the dignity of the profession for a doctor to make any kind of an examination for twenty-five cents. If they did, their membership was forfeited.

The delinquent list was thought to be a specific for all the financial ills that so afflicted the younger men and was used fully for a year or two. But instead of abating the disease, it seemed to increase the fever and, after an ice man had to send to Monroe for a doctor, it fell into innocous desuetude. The collection of doctor bills still remains one of the major problems and should be worked out in the next presidential campaign.

On a hot July afternoon, a couple of aspiring and perspiring young surgeons were doing a mid-thigh

amputation at the Good Samaritan. A colored orderly, subbing for Parks, was keeping off the flies with a peach limb. After the bone was exposed all around and ready for the saw, the orderly swayed back and forth a few times and then fell face forward right into the gaping wound, peach limb and all. He was disentangled with some effort and laid to one side, with slight damage to the technique. The operation was completed and the patient recovered nicely.

The colored hospital was noted, even then, as a very interesting museum of pathological anatomy. If Dr. Charlie Strong could not be located anywhere else in the county, you would likely find him at the Good Samaritan, surrounded by a forty-pound multiple fibroid.

The hospital expansion in the county was largely due to the energy and devotion of Mrs. Jane R. Wilkes. When a hospital was a small thing in the eyes of the profession, it was a great building in the heart of this good woman. She spent much of her time, means and influence in promoting the welfare of the sick and was able to enlist the interest of her many friends in this noble work. For many years. she felt responsible for deficit at St. Peter's or the Good Samaritan and, in one way or another, managed to keep the books in some sort of balance. Any one wishing to put up a million dollar memorial hospital in Charlotte, should put a marble statue of Mrs. Jane R. Wilkes just inside the front door.

And now we must pause to shed a few, but very few, tears on the passing of dear old Dobbin and the saddle-bags. In 1899, thirty manufacturers made and

sold six hundred motor cars. It was thought that output would last for thirty years. From the very first, the Mecklenburg doctors took to the idea and soon the one cylinder Maxwell was on the streets and, at times, in the corn field along the road. The first cars were light and if anything went wrong with the steering gear, you just got out and lifted the front end around and went back to the shop. These early cars were very tempermental and refused to move on a frosty morning until they had a pot of hot kettle-tea.

They were all equipped with the Armstrong Starter, which was also a good wind-tester. We can hardly realize at the present time that the first cars were sold C. O. D., so accustomed are we to the F. O. B. and the monthly payment.

Just how many lives the automobile has saved, we do not know. But, at present, it is killing some 25,000 people per year in these United States. We can never go back to eight miles an hour—it was too slow—but eighty miles an hour is too fast to enjoy the scenery.

MEDICINE AMONG NEGROES IN MECKLENBURG COUNTY

By Dr. French Tyson

IT IS not the purpose of the writer to offer biographical sketches of the twenty odd negro physicians who have come to Mecklenburg County and attempted to rise upon successive stepping stones of the past achievements and past mistakes of their black predecessors. But, as we look back almost fifty years to the era when negro professional men sprang into being over-night, as it were, from barber's chair to bishop's bench and from plow handle to medical profession, one is inclined to remark that nature was surely in her best humor when she produced such Negroes as J. T. Williams and A. A. Wyche — two real men destined to become Mecklenburg County's outstanding representatives of the negro medical profession.

These two negroes approached more closely than any others the embodiment of the negro's professional aspirations in Mecklenburg County. Their contribution to medical progress was not merely confined to the usual "don'ts" which seniority helpfully bestows upon striving professional youth, but of equal importance in those trail-blazing days was conduct— conduct in and out of the profession. Both these men exhibited conduct that was actuated by lofty purpose and ethical principle; both had personality, alike wholesome and refreshing; both were capable physicians; both made their way financially, made cultural contacts and enjoyed an active and creditable par-

ticipation in the civic, social and political affairs of their day.

The one was a born diplomat, the other a gentleman. While we do not usually associate deep moral convictions with the guileful arts of diplomacy, yet, be it truthfully said of Dr. J. T. Williams that, as a member of the board of aldermen at home and a Consul to Sierra Leone in Africa, he succeeded infinitely well in satisfying both white and black constituents as well of his honesty as of his rare caution and tactful prudence. Dr. Wyche impressed one with his courtesy, his genteel manner, his sincerity, and the belief that the welfare of his people was the chief burden of his soul.

Thus it happens that the twenty odd medical men that have come on and off the scene here in Mecklenburg County have been given the proper slant on professional esprit-de-corps through the effective agency of the successful achievements and worthy lives of these two men.

Mecklenburg County first offered sanctuary to a black physician in 1886. It was eminently fitting that so capable a man as J. T. Williams should have been the one to direct the black man's steps in his effort to plant them upon higher, still higher ground in the trek up through forty-three years of medical progress.

In 1890, there came one D. E. Caldwell, who, after but one year's sweat, folded his tent like the Arabs of old and stole away into the night. Next came N. B. Houser, a native son, in 1891. Dr. Houser was instrumental in organizing our State Medical Society

in 1892. After ten years of lucrative practice he moved to Helena, Arkansas, where he spent twenty years in the drug business, returning to Charlotte in 1920 for a protracted stay. He is still active, full of vigor and push and is a living example of the doctrine that hard work is the open sesame to success. Dr. Houser today is perhaps the busiest negro physician ever to cast his lot on Mecklenburg soil. Next came Dr. Pope, who struggled for three years without avail —1895-1898. Next, in 1897, came M. W. Alston, the most brilliant of his contemporaries. Sudden death visited him after but one year of his professional effort.

A definite stimulus to progressive effort was born in 1897-98 with the advent of three men in rapid succession during the same year, viz.: A. A. Wyche, W. H. Graves, and George Williams. Wyche and Williams "carried on" with distinction and credit and performed our first major operation. Dr. Wyche organized our present Charlotte Medical, Pharmaceutical and Dental Society, became its first president in 1900, enjoyed **entre** as visiting physician to the Good Samaritan Hospital—a distinction highly appreciated, zealously guarded and religiously cherished by him. He so practiced, so demeaned himself, so "carried on" in his several contacts in and about the Good Samaritan Hospital that, in his final taking off in 1917, as he passed through its doors for the last time, he flung them happily ajar with an earnest prayer that they never be closed in the face of an aspiring and capable black physician, who, like Wyche, might so demean himself as to afford added and ample justification to

the controllers and directors of the policies of that institution in allowing black men to avail themselves of every opportunity of profiting by its use as the one indispensable requisite to medical progress.

In this connection, the writer takes advantage of this opportunity to express his infinite gratitude to, and appreciation of the attitude of the board of managers and the surgeon-in-chief of Good Samaritan Hospital towards capable negro physicians. Thank God not a single one that has been favored has brought discredit upon the hospital or himself. It is devoutly to be wished that the standard set by Wyche will be as a lighted torch burning the more resplendently for having been passed from one worthy successor to another.

Following Wyche in rapid succession came Pethel, Kress, Byers, Walker, Tyson, Brown, Johns, Blackman, Young, Craig, Hogans, Carter Green. Since 1912 there has been a steady influx of hospital-trained physicians. The one gratifying result of this influx is that we have been able to develop one capable surgeon—Dr. Blackman.

Our medical society organized by Dr. Wyche, is still alive. We maintain a library, meet once each month and enjoy occasional and profitable lectures by members of the Mecklenburg County Medical Society. Dr. Pethel has the distinction of having been accorded the longest tenure of office as our president. Dr. Blackman is our present local incumbent and is a "likely" candidate for a similar honor in our State Medical Society.

(Editor's Note:

To the above must be added, Dr. French Tyson, an A. B. of Harvard, M. D. of Howard Universities, who came to Charlotte in 1913, and, by his erudition, energy and progressiveness, early established himself as a leading member of his profession and race. He is head of the obstetrical department, teacher in the Nurses' Training School, and a liberal contributor, both in time and money, to the Good Samaritan Hospital. Dr. Tyson has been a useful and valuable addition to the Mecklenburg medical personnel.

The editor here begs to pay a tribute to the colored race. Born on a plantation about the beginning of the Civil War and remembering that during that struggle, all able-bodied men were at the front, the women and children and our soldiers were supported and defended by the slaves, and that there is not recorded a single instance where womanhood was defamed or any overt outbreak of crime perpetrated, we, Southerners, owe them a deep debt of gratitude.

Later on in life, after the death of my mother, I was partially raised by a "Black Mammy", played, fished, went in the ole swimming hole, and often ate with the "picannies", and, for more than twenty-five years, was surgeon to the colored hospital. I learned much of the negro character. In estimating their character, we often fail to realize that they are only about five generations removed from their primitive state and that they have adopted the evils of the white man's civilization, together with their primitive instincts. Their progress has been marked, especially

along educational lines, with such leaders as the above men.

With the sympathetic aid of the white man, their upward climb is assured. To me, they have been appreciative, trusting and loyal. I shall never lose affection and hope for the race.)

HISTORY OF THE MECKLENBURG COUNTY MEDICAL SOCIETY

DR. L. C. TODD, our secretary, will now take up the "History of the Mecklenburg County Medical Society," which has been pronounced by prominent outside medical men as among the best in this country.

The personnel of this society consists of the highest type of medical men and the papers show that it keeps abreast with the rapid advance of scientific medicine along all branches. It has been remarkably free from the petty jealousies and personal antagonism often ascribed to the profession. Strict attention to the scientific as well as the social features has contributed to its success and attendance. There is rarely a meeting when there are not present several physicians from a distance, who come especially for the meeting. Their presence and participation are appreciated and are added incentives to more efficient work. Hence they are thrice welcome.

THE MECKLENBURG COUNTY MEDICAL SOCIETY

Organization

N RESPONSE to a call issued by District Organizer Dr. E. C. Register, the physicians of Mecklenburg County met at the courthouse in Charlotte, N. C., October 7, 1903, for the purpose of organizing a County Medical Society.

The meeting was called to order by Dr. Register who acted as chairman until officers were elected. Dr. H. Q. Alexander was elected temporary secretary. Extracts from the constitution of the North Carolina State Medical Society were read, showing the necessity for organizing a County Medical Society, as the local society is the only channel of admittance to the State Medical Society.

On motion, it was agreed that a county society be organized and that all physicians present be considered applicants for membership unless they at once expressed their intention of not becoming members. The constitution and by-laws prepared and recommended by the American Medical Association and endorsed by the North Carolina State Medical Society for the government of county medical societies were then read, considered and adopted by sections, making occasional amendments to suit the local needs.

Officers

Dr. H. Q. Alexander was elected the first president of the society; Dr. Annie Alexander became vice-president, and Dr. Parks M. King was the first secre-

tary-treasurer. A board of censors, a program committee and a committee on public health and legislation were appointed at the meeting.

A list of the officers of the Mecklenburg County Medical Society from its beginning, in 1903, to the present time (1929) follows later herein.

Meetings and Programs

In its earlier days, the society held meetings monthly and the programs were supplied by the membership in alphabetical order, three members on each program, and a fine for non-appearance. Several of the earlier meetings were taken up largely with the question of an adoption of a "fee bill" and it was finally decided that the two fee lists be adopted; for Charlotte township and incorporated towns in Mecklenburg County, which list was essentially that one then maintained in operation by the Charlotte Medical Society and another for "regular county practice." It is noted that the fee under the latter schedule was $1.50 per visit with fifty cents additional for every mile over three and that the fee for obstetrical cases was $7.00. After 10 p. m., fees were double. Surgical fees were governed by the Charlotte Medical Society.

During the first year of its existence several landmarks were laid down by the society. The president was haled as the "Father of the Pure Medicine Bill" supported in Congress by E. Y. Webb of Shelby. The society became active in attempting to have the county care for the indigent consumptive and an agreement was reached with the commissioners whereby a home was to have been provided. The needs of the Good

Samaritan Hospital were also brought to the attention of the county officials.

Later programs showed a study of one of the more important drugs at each of the meetings. Alcohol was the first drug discussed and the secretary notes that it "elicited a very spirited debate." A study of the coal tar products, aconite, digitalis, mercury, opium, quinine, belladonna, nux vomica, iron, iodine and other important drugs followed.

The meeting place was changed February 6, 1906, to the mayor's office of the City Hall. In the summer of 1906, typhoid fever was prevalent and a committee of the society worked with the board of health towards the control of the situation. Shortly thereafter, an ordinance was passed by the aldermen of the City of Charlotte making the disease reportable. Thereafter for some time a list of all cases of reported diseases was read out in society meetings. This summer also a committee from the society lobbied at the democratic convention for the purpose of securing the instruction of the democratic nominee to vote for a juvenile reformatory and increased appropriations for the insane. Following the typhoid wave of the summer of 1906, the county society intensified its efforts to have a sanitarian employed by the city to control the water-shed and city water plant and to provide a city bacteriologist together with the necessary laboratory equipment. In 1907, several interchanges of opinion between the board of aldermen, the Mecklenburg County Medical Society and the Ministerial Association were expressed regarding the writing of prescriptions for whiskey. One of the society's

members likened the liquor problem to a skunk which the prohibitionists and the courts had left in the camp of the medical profession.

In October, 1908, the meeting place was changed to the North Carolina Medical College, but it was promptly moved back again to the City Hall. The assistance the society gave to the campaign against hookworm disease is recorded in the minutes of 1908 and 1909. At this time also it lent its efforts towards standardizing the requirements for entrance to medical colleges and supported the bill then being presented by the State Medical Examining Board. Numerous other important health and education matters engaged the attention of the society during the next few years; such as suitable control of milk distribution, drainage acts, education on hookworm disease, inspection of water supply, inspection of slaughter houses, etc. Serum diagnosis of syphilis and treatment of this disease and also pellagra with salvarsan came in for a great deal of discussion. In the election of officers for 1912, with three candidates running for president, six ballots were necessary to secure a decision as to who was elected. Discussions of subjects upon the scientific programs at this time had become so animated and prolonged that it was found necessary to limit the presentation of a subject to ten minutes' time and discussion to three minutes. In March, 1912, the Physicians Club of Charlotte, which had organized a medical library, invited the County Medical Society to participate in the library feature of the club. Later in this year, the hall of the Physicians Club was turned over to the society as a regular meet-

ing place. This hall was on the third floor of the Realty Building.

In 1913, the hookworm campaign in the vicinity of Charlotte was assisted in by the society. Interest in chemotherapy was shown by the members on the program during this year. Legal medicine and medical ethics were given formal space on the programs and members of the faculty of the University of North Carolina Medical Department presented scientific theses. The discussions of pellagra and the public health service campaign held places of importance. Occasional joint meetings were held with the local Dental Society. An elaborate clinical congress was presented at the occasion of the District Medical Society meeting in 1916. By the end of this year, the membership of the society was eighty-six in number.

Several organized groups of quacks and irregular cults such as the "German-American Doctors" and the "Radio Doctors" were investigated by committees of the society and encouraged to move to other fields of activity. In 1917, the society mapped out a City Health Department for Charlotte and were successful in getting it started. During this year the effects of the World War began to be seen. Addresses before the society by medical men in the services were heard; record was taken of members who intended going into the Medical Reserve Corps and news from members in the camps was distributed. Some of the members training in camp returned and reported their experiences. Committees were formed to work with the medical officers of the local cantonment—Camp Greene—and to care for the interests of the

members who were away at war. Medical officers from the camp hospital also frequently took part in the discussions and numerous ones of them were made honorary members of the society.

During the World War and the period shortly thereafter, the records of the society are incomplete. However, the war record of the various members is included in a separate chapter of this history. It is interesting to note that on the society's roll call of 1917 there is inscribed the word "war" in blank spaces in the records after the names of nineteen members. A larger number of the members were absent for the same reason during 1918.

Post-war return of the local organization to its former activity was rapid, and the membership grew rapidly, largely due to the fact that many new doctors had located in Charlotte. Programs were replete with war experiences.

It became the custom of the society to present a high-grade watch to each one of the older members upon the occasion of his reaching his seventieth birthday.

In 1923, the new Professional Building, at the corner of Seventh and North Tryon streets, was completed and the society moved its quarters to the special meeting hall built for them by the company owning the building. This hall was on the third floor of the innermost wing and presented a large enough auditorium for the meetings of the growing society as well as wall space for the excellent medical library which

had been, by this time, collected by the Charlotte Medical Library Association. Two years later it became necessary for the owners of the building to extend upward to eight stories the wing in which the hall was located and the top story was built as the auditorium and meeting place for the County Medical Society, and which it still remains. New furniture and equipment was purchased at the time the Professional Building was occupied.

About this period of time considerable activity of the society was spent in endeavoring to secure a four-year medical school in Charlotte in connection with Duke University which was undergoing reorganization by the recently created Duke Foundation.

In 1924, the society extended its active efforts towards the creation of a tuberculosis hospital for the county and furnished committees to work with the County Commissioners. During the next five years several nationally and internationally known physicians, surgeons, educators and sanitarians were heard and seen by the society in lecture and clinic. A group of doctors within the county society known as the Charlotte Clinico-Pathological Society should be credited with securing some excellent guest talent and arranging some good clinics as well as providing some valuable programs of their own.

At the time of the preparation of this history, the Mecklenburg County Medical Society had a membership of one hundred and thirty-two.

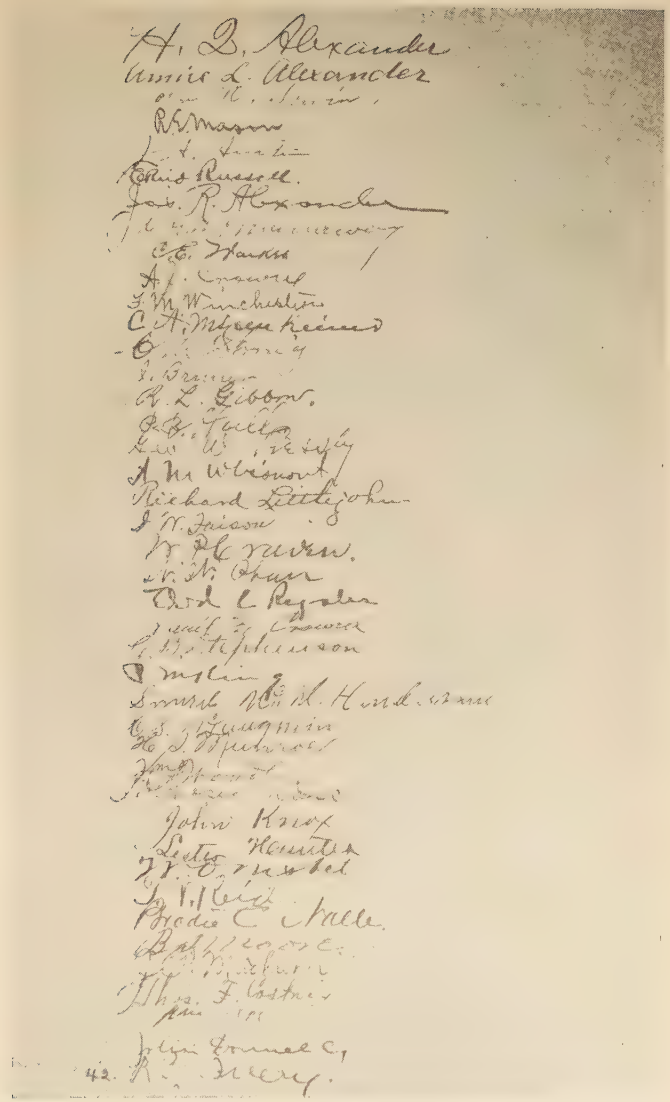
The First Roster

(Note: The members signed the constitution and roster in the order in which they became members. This list covers a period of several of the earlier years.)

H. Q. Alexander	R. L. Gibbon	H. S. Munroe
Annie L. Alexander	P. B. Hall	Wm. Woodley
John R. Irwin	Geo. W. Pressly	W. Hosea Moss
R. E. Mason	A. M. Whisnant	John Knox
J. A. Smith	Richard Littlejohn	Lester Hunter
E. Reid Russell	I. W. Faison	W. O. Nisbet
Jas. R. Alexander	W. P. Craven	T. N. Reid
C. G. McManoway	W. W. Pharr	Brodie C. Nalle
C. E. Walker	Edward C. Register	B. S. Moore
A. J. Crowell	Samuel M. Crowell	J. P. Matheson
F. M. Winchester	C. B. Stephenson	Thos. F. Costner
C. A. Misenheimer	P. M. King	Wm. Allan
C. M. Strong	Simril Mc. Henderson	John Donnelly
J. Brunson	C. S. McLaughlin	R. Z. Query

Officers for 1903 and Succeeding Years

	President	1st Vice-President	Secretary and Treasurer
1903 (Oct.-Dec.)	H. Q. Alexander	Annie Alexander	P. M. King
1904	H. Q. Alexander	Annie Alexander	P. M. King
1905	L. W. Hunter	R. L. Gibbon	P. M. King
1906	W. W. Pharr	W. O. Nisbet	P. M. King
1907	J. R. Irwin	T. F. Costner	W. D. Witherbee
1908	C. A. Misenheimer	G. W. Pressly	R. H. Lafferty
1909	Annie Alexander	E. R. Russell	R. H. Lafferty
1910	A. J. Crowell	F. O. Hawley	R. H. Lafferty
1911	A. M. Whisnant	C. N. Peeler	H. A. Wakefield
1912	T. F. Costner	L. W. Hovis	H. A. Wakefield
1913	W. O. Nisbet	J. Q. Myers	O. B. Ross
1914	C. E. Walker	B. C. Nalle	O. B. Ross
1915	J. H. Tucker	R. F. Leinbach	O. B. Ross
1916	C. S. McLaughlin	R. F. Leinbach	O. B. Ross



THE FIRST ROSTER OF THE MECKLENBURG COUNTY MEDICAL SOCIETY

1917	J. P. Matheson	L. W. Hovis	O. B. Ross
1918	B. J. Witherspoon	C. N. Peeler	O. B. Ross
1919	B. C. Nalle	S. M. Henderson	J. L. Ranson
1920	C. M. Strong	R. Z. Query	J. L. Ranson
1921	J. P. Munroe	*	J. L. Ranson
1922	L. W. Hovis	H. W. McKay	J. L. Ranson
1923	J. C. Montgomery	*	J. P. Kennedy
1924	J. Q. Myers	S. M. Henderson	J. P. Kennedy
1925	P. M. King	L. G. Gage	J. P. Kennedy
1926	R. F. Leinbach	Oren Moore	J. P. Kennedy
1927	J. P. Kennedy	J. A. Elliott	T. P. White
1928	S. M. Henderson	Alonzo Myers	L. C. Todd
1929	J. Mc. DeArmon	H. P. Barret	L. C. Todd

*Records incomplete.

Mecklenburg County Medical Society Roster, 1929

Abernathy, H. N.	Elliott, J. A.	Kelly, L. W.
Alexander, Jas. R.	Faison, Yates W.	King, Parks M.
Allan, William	Ferguson, R. T.	Lafferty, R. H.
Andes, Geo. C.	Fetner, L. M.	Leinbach, R. F.
Ashe, John R.	Gage, L. G.	Lubchenko, N. E.
Austin, D. R.	Gallant, R. M.	McClelland, W. B.
Austin, F. D.	Gaul, J. S.	MacConnell, J. W.
Barret, H. P.	Gibbon, James	McCoy, T. M.
Barron, A. A.	Gibbon, R. L.	McFadden, R. H.
Biggart, W. P.	Graham, W. A.	McGregor, Geo. D.
Blalock, B. K.	Hand, E. H.	McKay, H. W.
Black, G. W.	Hart, V. K.	McKay, Robert W.
Bost, T. C.	Henderson, S. M.	McKnight, R. B.
Blair, Andrew	Hipp, E. R.	McLaughlin, C. S.
Boyette, E. C.	Holton, T. J.	McLean, E. K.
Brenizer, A. G.	Hovis, L. W.	McLeskey, J. H.
Britt, C. S.	Houser, O. J.	McManus, H. F.
Craven, Thos.	Hunter, L. W.	McPhail, L. D.
Craven, W. W.	Hunter, M. C.	McPhaul, W. A.
Crowell, A. J.	Hunter, Myers	Martin, W. F.
Crowell, L. A.	Irwin, John R.	Martin, Wm. J.
Davidson, J. E. S.	Johnston, J. G.	Matheson, J. P.
DeArmon, J. Mc.	Kelleher, L. B.	Mathews, Vann M.
Donnelly, J.	Kennedy, J. P.	Miller, Oscar L.

Misenheimer, C. A.	Northington, J. M.	Squires, C. B.
Misenheimer, T. M.	Patterson, Reid	Strong, C. M.
Montgomery, J. C.	Peeler, C. N.	Strong, W. M.
Mills, C. H. C.	Petteway, G. H.	Sullivan, Claude H.
Moore, R. A.	Phillips, C. C.	Taylor, H. C.
Moore, A. W.	Pressly, G. W.	Thompson, S. R.
Moore, Oren	Query, R. Z.	Todd, L. C.
Motley, F. E.	Ranson, J. L.	Tucker, John Hill
Munroe, H. Stokes	Rankin, W. S.	Wakefield, H. A.
Munroe, J. P.	Ray, F. L.	Wannamaker, E. J.
Myers, Alonzo	Reid, T. N.	Walker, L. D.
Myers, John Q.	Richardson, J. C.	Whisnant, A. M.
Nalle, B. C.	Ross, Otho B.	White, T. P.
Nance, C. L.	Scruggs, W. M.	Whitley, Ayer
Neblett, H. C.	Shirley, H. C.	Wingate, G. C.
Newell, L. B.	Smith, Frank C.	Wishart, W. E.
Newton, H. L.	Shull, J. Rush	Woodruff, J. S.
Nisbet, D. Heath	Sloan, H. L.	
Nisbet, W. O.	Sparrow, Thos. D.	

Non-Resident Members:—Geo. Collins, H. Irwin, M. L. Townsend, F. W. Tydeman.

It is the custom of our society to present to each of its members, who has attained his Biblical three score and ten years, with a fine watch, as a token of our esteem and to encourage longevity.

Some of our members have been so modest about this achievement that they were almost forced to accept the gift—yes, we have one bachelor among the aged.

Those living who bear watches and are in active practice:

W. P. Craven	J. P. Munroe
L. W. Hunter	J. R. Irwin
C. A. Misenheimer	J. Mc. DeArmon

"Time to Retire Boys".

NATIVE MECKLENBURG DOCTORS WHO HAVE MADE GOOD ELSEWHERE

E HAD no records to consult (only memory), hence the list is far from complete. The number seems comparatively small, due to the fact that our own field was so inviting that very few left it. Those who did, however, have reflected honor on our profession and Mecklenburg's fair and happy land. To those who are living: your Mother salutes you. And, for those who are not, she drops a tear.

Dr. Paul Barringer, Charlotte: Founder of North Carolina Medical College at Davidson College. Teacher, a man of unusual mental endowment, is now living at Charlottesville, Va., in an environment to his liking.

Dr. John Kendrick, Steele Creek: Rockefeller Foreign Extension Health Work.

Dr. Ernest Cooper, Steele Creek: Chief of Staff, S. C. Tubercular Hospital, Columbia, S. C.

Dr. I. M. McLean, Steele Creek: Chief Surgeon, United Fruit Company's Hospital, South America.

Dr. Charles Ross*, Steele Creek: Staff, Western N. C. Hospital, Morganton, N. C.

Dr. Robert M. Reid*, Steele Creek: Leading physician, Gastonia, North Carolina.

Dr. Joe Sloan*, Steele Creek: Leading physician and surgeon, Gastonia, N. C.

Dr. Baxter Hunter, Sardis: major, U. S. Army.

Dr. J. K. Ross, Charlotte: major, U. S. Army.

Dr. Richard Ross, Providence: Leading physician, Wadesboro, North Carolina.

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*NOTE:—I want to call attention to the number of distinguished physicians that Steele Creek has furnished.

Dr. Wm. Hart, Providence: Successful physician, civic and political leader, Wadesboro, N. C.

Dr. Alger Reese, Charlotte: High-standing eye, ear and throat man, New York City.

Dr. Emory Alexander, Charlotte: Surgeon and teacher, Philadelphia.

Dr. John Gibbon, Charlotte: Professor of surgery, Jefferson Medical College, Philadelphia.

Dr. Porter Vincent, Davidson: Prominent member of Mayo Staff, Rochester, Minn.

Dr. Henderson Irwin, Charlotte: (Son of J. R. Irwin) Prominent physician, Eastern Carolina.

Dr. John Boyce, Pineville: Prominent physician, Polkton.

Dr. Wm. Crowell, Steele Creek: Prominent physician, Burgaw, N. C.

Dr. Thomas Kirkpatrick, Sharon: Successful physician, now retired—Fort Mills, S. C.

Dr. Boyce Elliott, Sharon: Successful physician, Fort Mills, S. C.

Dr. D. A. Garrison, chief surgeon and owner of Gaston Hospital, Gastonia, N. C.

Dr. Joseph Treloar Wearn, Charlotte: Although a young man, graduated at Harvard in 1917; has already achieved a pre-eminence in the profession, was instructor and assistant professor in Harvard Medical School, 1923-1928 and, at present is professor of medicine, Western Reserve Medical College, Cleveland, Ohio. Is the author of sixteen original publications of scientific value to the profession. This is an incentive for our younger physicians to strive for greater things.

Dr. Richard Kell, Providence: Prominent in Mississippi medicine.

IN MEMORIAM

THE Reaper has not been idle, even among those who so valiantly fought him. True to form, he has aimed his darts at shining marks and left gaps hard to fill, and hearts that grieve.

We include in this section, those who are not mentioned in the body of the work, but have recently passed.

It has always seemed to me to be the irony of fate that calls the "Doctor" to pass through the valley of the shadows, when he has given his all to stave off or assuage this passage for others, but rather that the chariot which carried Elijah to some other sphere, should take the tired "Ole Doctor" the same way. But why should he dread it when he has faced it so often?

Dr. Joseph Bruner:

Dr. Joseph Bruner of Matthews, Mecklenburg County, died suddenly on May 2, 1906, while administering a dose of medicine hypodermically to a patient to whom he was called at 4:00 o'clock A. M. The collapse came suddenly. Dr. Bruner was one of the best-known physicians of Mecklenburg County, was a member of the Mecklenburg Medical Society and a member of the State Medical Society. He was surgeon in the Civil War, and was a man of wide influence.

Dr. R. J. Brevard:

Died August 11, 1906, at his home in Charlotte. Dr. Brevard was the youngest son of the late Judge Theodore W. Brevard and Mrs. Carolina Brevard. He inherited from his parents position and charm of manner. Both were of distinguished lineage and from them he derived his fine mind, his gentleness, his loyalty to friends, his magnetism and his courage. He was born in Tallahassee, Florida, December 15, 1848, thus being in his fifty-eighth year.

Dr. Littlejohn:

Dr. Littlejohn, formerly of Mecklenburg County, last two years of Jackson and Swain counties, died at Whittier about October 25, 1906.

Dr. Joseph Graham:

Born April 30, 1837, in New Bern, North Carolina, Dr. Graham came to Charlotte in 1859. The medical world of North Carolina has acknowledged his eminent skill throughout the forty-eight years of

his constant work in alleviating the sufferings of mankind.

Dr. W. H. Wooten:

Dr. W. H. Wooten of Davidson College died on February 10, 1914, in Mecklenburg County where he was practicing, at the age of forty-five years.

Dr. F. O. Hawley:

Dr. Hawley was born in 1845 and died in 1915. Was first vice-president of the Mecklenburg County Medical Society in 1910. Mention is made of Dr. Hawley in the section on "Early History."

Dr. R. Sydney Cauthen:

Dr. R. Sydney Cauthen of Charlotte, died March 24, 1915. He was born in 1870, graduated at Baltimore Medical College in 1902, was in general practice in Kershaw, S. C., for eight years, and for four years, up to the time of his death, practiced eye, ear, nose and throat in Charlotte, N. C. He was a member of the American Medical Association, Southern Medical Association, and State, Seventh District and County Medical Associations; was on staff of Presbyterian Hospital, Charlotte.

Dr. F. M. Winchester:

Born in 1857 and died in 1917. Practiced in Charlotte fourteen years. Is mentioned in section on: "Early History."

Dr. Samuel McKee Crowell:

Born in Union County, September 30, 1869, and died in Charlotte, May 29, 1917, in his forty-eighth

year. Graduated at the University of Maryland in 1895. Licensed by State Board of Medical Examiners in 1895. Practiced at Hickory Grove in Mecklenburg County, later moving to China Grove, and there remained until 1904, when he located in Charlotte and established what is known as the Crowell Sanatorium for the treatment of nervous diseases and alcoholic and drug addicts, which institution flourished under his management, gaining a state-wide reputation. Member of Tri-State Medical Society, and for many years a member of the Mecklenburg County Medical Society. Vice-president of North Carolina State Medical Society in 1914 and 1915. In civil life he was a public-spirited and progressive individual, lending a ready and helpful hand to movements for the uplifting and betterment of his community and state.

Dr. Heman Sadelson:

Born in New York in 1854. Practiced in Charlotte about twelve years. Was an active member in Medical Society. Dr. Sadelson is mentioned in section: "Early History."

Dr. W. K. Reid:

Born August 10, 1868, at Sharon, Mecklenburg County. Alumnus Davidson College and the University of Virginia, also University of New York. Dr. Reid practiced first at Waxhaw, S. C., then at Pineville, from about 1894 to 1909. In 1909, Dr. Reid moved to Charlotte, where he was engaged in the practice of medicine until his death, April 5, 1919. Dr. Reid was, during the whole period of his practice

in Charlotte, a member of the Mecklenburg County Medical Society.

Dr. James Williamson Squires:

Born at Matthews, N. C., November 2, 1888. Attended Charlotte City Schools. In 1911, he graduated with the degree of Doctor of Medicine from the North Carolina Medical College, and after additional work at Johns Hopkins and Rockefeller Institute he became associated with his uncle, Dr. A. J. Crowell, in Charlotte. In 1913, after special work under some of the best roentgenologists in this country, he decided to give his entire time to this specialty, and it was as a roentgenologist for the Yale Mobile Hospital No. 39 that he was serving his country in France at the time of his death, December 16, 1918. As a roentgenologist, he ranked with the best men in this country and he spared no energy in working and developing his line of work in this section of the South. Many and glowing reports came to us of his work overseas. His ceaseless activity, his unlimited energy, his enthusiasm and, withal, his gentlemanly bearing made him a favorite with the unit with which he worked. He was buried in France.

Dr. Charles E. Walker:

Born in 1867 and died in 1918. General medicine. Family physician par excellence. Had unusual blending of the qualifications of a first-class physician, geniality of disposition, and cleanliness of life, which made him one of our most popular and beloved of men. Had a sudden call in the midst of his very active life, which made his loss more acute, and, when it

was known that Dr. Charles had gone, a cloud of sorrow hung heavily over the county; especially was there sorrow among his fellow physicians because they would never see his beaming and trusting face again.

Dr. M. C. Houser:

1886-1918. Born in Gaston County, October 7, 1886; graduated University of North Carolina in 1914, and began practicing in Charlotte the spring of 1916. Served as first lieutenant during World War at Camp Jackson. During the flu epidemic he finally fell victim, and, after an eight days' illness, died on October 7, 1918. Dr. Houser possessed a most pleasing personality, and his loss was keenly felt both in the camp and in his chosen profession.

Dr. E. M. McCoy:

Dr. E. M. McCoy died suddenly at his residence in Charlotte, N. C., May 28, 1919. Dr. McCoy was a well-known physician in this city, and for quite a while was city physician. He was graduate of the Medical Department of Davidson College and received his diploma in 1892, and immediately afterwards received his license to practice medicine in this state. Practiced twenty-six years. He was an intelligent, active and successful practitioner.

Dr. Edward Chauncey Register:

Born in Rose Hill, Duplin County, N. C., October 20, 1860. Educated at University of North Carolina and University of New York, receiving his degree in 1880. Later, he took post-graduate studies at hos-

pitals and clinics in Europe. Came to Charlotte in January, 1887, after having practiced medicine in Enochville, Rowan County, N. C. Dr. Register was a member of the Board of Medical Examiners for the State of North Carolina from 1898 until the time of his death. In 1916, he was president of the American Medical Editors' Association; in 1915, one of the founders and builders of Charlotte Sanatorium, and president of the Tri-State Medical Association the same year. Perhaps the most enduring monument he left behind was in the establishment of the Charlotte Medical Journal in 1891. No doubt his place on the board of trustees of Trinity College was, to him, a matter of more pride than any other honor which had come to him. Dr. Register was a man of striking personality, which would anywhere attract attention and command respect. He died in February, 1920, at the Charlotte Sanatorium, Charlotte, N. C. He was an eminent physician, a constructive builder in medical organization, and a leader in the development of medical science.

Dr. Banks Withers:

Dr. Banks Withers was born at River View Farm, Mecklenburg County, December 27, 1869. He graduated from Davidson College in 1891. For two years he taught school, then entered medical college. He graduated from the University of Maryland in 1896. Moved to China Grove the same year where he had a large county practice for twenty-four years, when he moved to Mooresville, N. C., in 1918. He died at the Charlotte Sanatorium on November 6, 1920.

Dr. A. M. Herron:

Dr. Herron was sixty-one years old at the time of his death, having been born in Mecklenburg County, January 20, 1860. He was the son of Dr. Isaac W. Herron and Lethia Cooper Herron. His father was a well-known physician in this section of the state who practiced medicine in this county half a century prior to his death. Before settling in Charlotte sixteen years ago, Dr. A. M. Herron practiced medicine in Steel Creek township for nearly thirty years.

Dr. George W. Graham:

1847-1924. Practiced in Charlotte about twenty-seven years. He was a member of the Raleigh Academy of Medicine, the State Medical Society, the Charlotte Academy of Medicine, president of the Charlotte Library Association. He was an ardent lover of his native state and a staunch defender of the authenticity of the Mecklenburg Declaration of Independence. His historical and literary works on this subject, in collaboration with Dr. Alexander Graham, are accepted by many as authoritative. Dr. Graham was intensely loyal and devoted to his state and county and to the University of North Carolina, and he never tired of depicting the glorious achievements of each. He was sanguine of temperament and was closely attached to his friends and relatives. His death was the cause of extreme sorrow, not only in Charlotte but throughout the entire state.

Dr. Hilliard M. Wilder:

1857-1925. Born in Wake County. Graduate of Bellevue College. Practiced in Charlotte thirty years. Major in Spanish-American War. U. S. ex-surgeon. Superintendent of health for a number of years. A political force, surgeon of note, virile character, impressing one as a man of ability and force. He responded to every call, and was held in high esteem by all classes.

Dr. James Aaron Austin:

Dr. James Aaron Austin, age sixty-four, one of the best known physicians of Charlotte, died at his home in Charlotte, December 16, 1924, after an illness of several months. Dr. Austin was born in Union County in 1860. He graduated from Jefferson Medical College in 1887, and joined the State Medical Society in 1904. He was a very popular physician and was looked upon as an example of the old type of "family doctor." He was at one time a city alderman, and was regarded as the father of the parks and playground movement in Charlotte. His two doctor sons, Fred and DeWitt, are practicing in Charlotte. The doctor was a big, two-fisted man, trained by early struggles to serve his fellowman through good years and bad, with unswerving faithfulness and broad human sympathy. Great physical vigor, a strong character, a good sense of humor, and abundant optimism fitted him splendidly for his long service to the sick and endeared him to his associates.

Dr. Isaac Wellington Faison:

Dr. I. W. Faison, one of the State's most eminent physicians and one of Charlotte's most prominent and influential citizens, died at his home July 6, 1926, at the age of 73 years, after a lingering illness of eighteen months. He practiced here for thirty-four years. He formerly practiced at Mt. Olive, moving to Charlotte in 1892. Did general practice until 1901, when he abandoned this field and specialized in internal medicine, making a special study in the diseases of children, and became one of the best known specialists in the South. For twelve years he was dean of N. C. Medical College and filled the chair of pediatrics. He was president of N. C. Medical Society in 1925, also of the Mecklenburg Medical Society. He was devoted to this society, seldom missed a meeting and almost always had something to say in his characteristic way upon any subject. He was very popular with the medical profession and all were interested and entertained by his forceful and original oratory. His remarks were impromptu, although he may have given thought to the subject beforehand. He rarely read or published a prepared paper. In addition to his career as an outstanding physician, Dr. Faison left a deep impression on his community as a leader in other fields than medicine. Served as city alderman and was a prime and aggressive mover in the establishment of better health laws and for all civic progress and moral uplift of his community. His influence in church, politics and medicine was Statewide. His was an outstanding positive character, intense and loyal in his friendship. During a long and

wasting illness Dr Faison's interest in medicine and love for his fellowmen never waned and we who were left behind knew that in his passing, "The Greatest Roman of them all had fallen."

Dr. William Watson Pharr:

Dr. William W. Pharr, aged sixty-nine, well-known Charlotte physician, died July 4, 1925, at his home. He had been in declining health for about three months. Dr. Pharr was born in the Poplar Tent neighborhood in Cabarrus County, and was the son of Dr. Walter W. Pharr, a prominent Presbyterian minister. He had been practicing medicine in Mecklenburg County since 1881, locating first in Newell. In 1907 he came to Charlotte. He was of a retiring nature, but those who knew him recognized that he had sterling qualities of devotion, courage, loyalty and faith, thus serving his day and generation as a man should do.

Dr. Romulus Z. Linney:

1876-1926. Came to Charlotte from Oklahoma in 1915, and soon established himself as a proctologist of wide reputation. He was a "Saul" in physique, polished in manner, genial in disposition, and prominent in all forward movements of the city and in medicine. His call was sudden. We realized that death had summoned from our midst a princely man.

Dr. Bartlett Jones Witherspoon:

1871-1928. Died suddenly. Surgeon and prominent in Masonry and social life. General practice. Happy in disposition, gentlemanly in bearing, staid

in friendship—these qualities gave him the confidence and respect of his profession and of the citizens generally. He was a royal good fellow.

Dr. T. J. Walker:

1835-1928. Practiced in Mecklenburg County for over thirty years. Dr. "Jack" was one of the most beloved men in our medical profession. (Mention is made of Dr. Walker in the section: "Early History."

Dr. Joseph Henderson Caldwell:

Born March 6, 1890, Winnsboro, S. C. Graduated North Carolina Medical College, 1914. He made the highest average of any member of his class. He was among the first American doctors to reach France with the A. E. F., as first lieutenant, Fifth Field Artillery, First Division. Served throughout the war in army of occupation. Was gassed twice. Died August 17, 1928. After returning from France he was for the remaining part of his life connected with the Nalle Clinic of Charlotte. Although his life was a comparatively short one he made a marked impress on the community in which he lived. Always a man of honor, justice and sympathy in his every professional relationship, both with his brother physicians and his patients. Our profession, in his death, lost a great physician, the community, a good citizen, and his loved ones a most affectionate and tender father and husband.

Dr. Henry Quincy Alexander:

Born in Iredell County, in 1863. Died suddenly of heart disease, June 11, 1929, at Pineville. Prac-

ticed in Providence since 1888. First president of Mecklenburg County Medical Society, 1903; served two terms in North Carolina Legislature; for eleven years was president of Farmers' Union; vice-presidential nominee for the Farmer-Labor party in 1928. Elder, Presbyterian Church. An extensive farmer. Dr. Alexander was a man of decided convictions, a profound and logical thinker, staunch and loyal in his friendship. As a classmate in college and intimate friend for forty years, the writer never knew a cleaner or more honest man and with the Psalmist can say: "He had clean hands and a pure heart, had not lifted up his soul unto vanity; nor sworn deceitfully," and believe that he "ascended unto the Hill of the Lord."

Dr. William Haines Wakefield:

1855-1929. Practiced in Charlotte over thirty years. Active member Mecklenburg County Medical Society. (Mentioned in section: "Early History").

Dr. Annie Lowrie Alexander:

Died in Charlotte, N. C., October 15, 1929, after a four days' illness of pneumonia. She was daughter of Dr. James Brevard Alexander, noted in this history. She graduated from Woman's Medical College of Pennsylvania in 1884, practiced and taught in Woman's College of Baltimore, made the highest grade of the class before North Carolina Board of Examiners. Came to Charlotte in 1887, being the first woman physician to locate in the South. Was an honorary member of the North Carolina Medical Society, Southern Medical Association and at one

time president of the Mecklenburg Medical Society, physician for Queens College, on staff of St. Peters and Presbyterian hospitals. Her social and benevolent activities were many and she performed her duties with rare ability and enthusiasm. She was a member of the D. A. R.'s and U. D. C.'s, closely affiliated with the Y. W. C. A., Crittendon Home, Alexander Rescue Home, Associated Charities and many other philanthropic enterprises. The demands kept her constantly busy. She came nearer filling the place of "community friend" than any personality in Charlotte.

MECKLENBURG DOCTORS IN WORLD WAR

IT SHOULD be with a feeling of pride that our physicians responded so nobly to their country's bugle call in the time of war. This was especially true of the World War.

Our county has the undisputed record of having furnished the largest percentage of her medical men for actual service to make the world safe for democracy in the United States. She furnished half or fifty per cent of its membership, which speaks for our patriotism and upholds the spirit of 1775, when Mecklen-

Mecklenburg Doctors in World War

burgers were the first to unfurl the Banner of Freedom. Owing to the number who went out, we can but briefly record their names, units in which they served, and where stationed:

William Allan, major, served with Hospital Unit "O".

Dewitt R. Austin, captain, served 81st Division.

Archie A. Barron, captain, served with Hospital Unit "O".

Thomas C. Bost, captain, served Royal Army, British Medical Corps.

Addison G. Brenizer, lieutenant-colonel, served with Hospital Unit "O".

Charles S. Britt, hospital apprentice, U. S. Navy.

Joseph Caldwell, first lieutenant, served with 1st Division.

Thomas Craven, first lieutenant, served with U. S. Transport Service.

John Donnelly, captain, served with 80th Division.

Joseph A. Elliott, first lieutenant, served Camp Stewart, Newport News.

Robert T. Ferguson, major, served with Base Hospital No. 90.

L. Merrell Fetner, captain, served with 80th Division.

John S. Gaul, major, served with Base Hospital No. 14 and No. 28.

R. Miller Gallant, captain, served with 82nd Division.

Marcus C. Houser, first lieutenant, (died) Camp Jackson, October 7, 1918, age 31 years.

Leighton Hovis, major, served with Sanitary Train, 78th Division.

Myers Hunter, major, served with Hospital Unit "O".

John B. Kennedy, captain, served with Base Hospital, Camp Bowie.

Parks M. King, captain, served with Evacuation Hospital No. 15.

Robert F. Leinbach, major, served with Hospital Unit "O".

James P. Matheson, major, served with Hospital Unit "O".

Vann R. Matthews, lieutenant (M.C.), U. S. Navy.

A. Wylie Moore, captain, served with U. S. Aero Squadron.

Baxter Moore, captain, Base Hospital, A. E. F.

Alonzo H. Myers, major, served on Red Cross Military Unit No. 2.

John W. McConnell, major, served with A. E. F.

Hamilton W. McKay, major, served with Hospital Unit "O".

Ralph H. McFadden, captain, served with Base Hospital No. 53.

Herbert C. Neblett, major, 5th Division, 21st Artillery.

Heath Nisbet, first lieutenant, U. S. Army.

James M. Northington, major, Base Hospital No. 65.

William L. Orr, first lieutenant, served with A. E. F.

George W. Pressly, first lieutenant, served, San Antonio, Texas.

John K. Ross, captain, served Camp Gordon, Atlanta, Ga.

William M. Scruggs, captain, served with Base Hospital No. 54.

Henry Sloan, first lieutenant, served with Base Hospital, Camp Lee.

James W. Squires, captain, served with Yale Mobile Hospital Unit, No. 39, died in France.

Claude H. Sullivan, first lieutenant, served Camp Dix, New Jersey.

S. Raymond Thompson, first lieutenant, U. S. Public Health Service.

Lester C. Todd, lieutenant (M.C.) U. S. Navy.

Maurice L. Townsend, major, served with 7th Division.

Joseph T. Wearn, first lieutenant, served with Hospital Service, U. S.

T. Preston White, private, 305 Batallion, Tank Corps.

William E. Wishart, captain, served with Base Hospital No. 81.

Unit "O"

In November, 1917, Major Addison G. Brenizer was instructed by the War Department to mobilize Unit "O." The same date, under separate orders, the following officers were ordered to Fort McPherson, Georgia, largely made up of Mecklenburgers:

William Allan, Captain M. R. C., Charlotte, N. C.

Robert H. Crawford, Captain M. R. C., Rock Hill, S. C.

W. Myers Hunter, Captain M. R. C., Charlotte, N. C.

Hamilton W. McKay, Captain M. R. C., Charlotte, N. C.

Robert F. Leinbach, Captain M. R. C., Charlotte, N. C.
James P. Matheson, Captain M. R. C., Charlotte, N. C.
Henry G. Turner, Captain M. R. C., Raleigh, N. C.
Marion H. Wyman, Captain M. R. C., Columbia, S. C.
Charles I. Allen, 1st Lieut., Wadesboro, N. C.
Archie A. Barron, 1st Lieut., M. R. C., Charlotte, N. C.
James M. Davis, 1st Lieut., Wadesboro, N. C.

November 10, 1917, under War Department authority of November 3, 1917, the following enlisted personnel of Hospital Unit "O," Charlotte, North Carolina, were ordered to active duty, and, under War Department authority, were transferred to the Medical Department, National Army, under command of Major Addison G. Brenizer, M. R. C., and ordered to proceed to Fort McPherson, Georgia, for the purpose of training and equipping command prior to duty overseas:

J. W. Sanford
D. H. Therrell
J. B. Pharr
T. J. Covington
C. B. King, Jr.
John F. Durham
R. M. Miller
D. A. Tompkins, Jr.
A. P. DuLong
A. Irwin Henderson
E. D. Taylor
E. P. Andrews
Caldwell Howell
J. T. McCrorey
Thomas C. Abernathy
Alfred S. Reilly
Fred Johnson
John M. Barringer
John H. Wilson
E. S. Reid, Jr.
R. T. B. Little
F. H. Medlock, Jr.
B. H. Webster
C. L. Whiteside
H. S. Caldwell
W. J. Brown
A. B. Taylor
R. H. Harding
Charles F. Brown
Thomas L. Taliaferro
W. M. Gibson
W. M. Osborne
Jess E. Corpening
W. F. Robertson
A. L. Young
O. M. Marvin
W. H. Branson
J. F. Swing
G. B. Crowell
Joel J. McAden
J. Foy George
H. L. Everett
Fred Field
W. A. Davis
J. C. Moose
Charles Glasgow
B. H. McGinnis
Joseph L. Knight
Norman W. Lynch

The following nurses of Hospital Unit "O" were ordered to active duty and upon completion of mobili-

zation to proceed to Ellis Island, New York, for training and proper equipment:

(Mrs.) A. W. Allen
(Miss) Margaret White
(Miss) Catherine A. Ikard
(Miss) Julia Colson
(Miss) Gertrude Shephard
(Miss) Cora L. Dearman
(Miss) Sarah M. Harris
(Miss) Josephine Watts
(Miss) Katherine Osborne
(Miss) Elma Jones
(Miss) Elizabeth Hill
(Miss) Harriett L. McCoy
(Miss) Elizabeth Low
(Miss) Edna M. Hill
(Miss) J. M. Alderidge
(Miss) Lula Lambeth
(Miss) Macie Stanford
(Miss) Sue J. Moore
(Miss) Blanch Leonard
(Miss) Bess Swearngan
(Miss) Rose A. Downey

Unit "O" reached its destination, Bordeaux, on March 16, 1918. Unit "O" was merged with the Massachusetts General Hospital and, with the addition of casual officers, nurses and orderlies, formed the largest single base hospital in France. Base Hospital No. 6 was located near Bordeaux and formed a hospital of 5,000 beds, 3,500 surgical and 1,500 medical.

The personnel of Unit "O" was distributed over surgical and medical services of the hospital. Major Richard Cabot of Boston was placed in charge of the medical service and Major Addison G. Brenizer of Charlotte, North Carolina, in charge of the surgical service.

On February 14, 1919, all officers and nurses of the units were ordered back to the United States, arriving in New York on March 2, 1919.

HOSPITALS

HOSPITALS are the visible expression of the heart of philanthropy, Christianity and medicine. History furnishes no evidence of their existence prior to the advent of the Great Physician, who furnished in the parable of the Good Samaritan on the Jerico Road, the call for and the duty humanity owed to the unfortunate sick.

If these institutions are the index of our civilization and religion, Mecklenburg County need not feel ashamed of her standing. They are also an index of medical progress, and have become an essential for the best work of the doctor and a tremendous help to the sick. Without them, medicine would lapse into its "dark age." Therefore, we make no apology for this section of this book as "The History of Mecklenburg Medicine" would indeed be incomplete without it.

It is fitting here to speak of one who was our "Hospital God Mother," Mrs. Jane R. Wilkes. Born in New York City, in 1837, she, in 1854, married Capt. John Wilkes and located in Charlotte, living at the Wilkes' homestead on West Trade Street. The Mecklenburg Hotel is now on part of the lot, but there are still evidences on the remaining plot of her love for the beautiful. She was, from the first and until her death in 1913, a leader in the social, intellectual and religious life of this city.

Although born and reared in the North, Mrs. Wilkes' first activity in hospital work was in the Confederate Hospital here, during the Civil War, which

was located on South Tryon and Bland streets. Shortly after the war, she was the prime mover in establishing St. Peter's Hospital, with two beds and

MRS. JANE R. WILKES

a matron, and, as long as she lived, Mrs. Wilkes was one of its greatest workers. (See section on "St. Peter's Hospital").

Mrs. Wilkes, single-handed, founded the Good Samaritan Hospital, and, as far as any records show, this was the first negro hospital established in the world. And, this one was established in the face of the racial prejudice then existing. She, by donations, both local and from the North, gradually expanded

it until, now, it has become of untold value to our colored race. (See section on "Good Samaritan Hospital").

It is not disparaging to the noble women who helped Mrs. Wilkes in this work to say that these two institutions owe their existence to her, and are living monuments to her zeal and her great loving heart, which embraced all classes and conditions of mankind.

Our hospital situation is rather unique in that for so large a population to serve, we have only one public (the Tubercular), three private, and four church hospitals. These latter do a large part of the charity work, partially helped by the city, county, and by Duke Foundation donations.

The following are brief histories of the Presbyterian, the Charlotte Sanatorium, the Mercy, St. Peter's, the Charlotte Eye, Ear and Throat, the Children's, the Good Samaritan and the Tuberculosis hospitals:

Medical Men Who Founded Our First Private Hospital

Dr. John R. Irwin, a man of commanding appearance, recognized ability, a lineal descendent of the immortal signer, is noted for his constant and punctual attendance at all medical, civic and religious meetings. He is entitled to the prize. He was the prime mover in establishing the first private hospital here, which was later merged with the North Carolina Medical College. With him were Drs. C. A. Misen-

heimer and Robert Gibbon, and with their united prestige and ability, it was made a success.

Dr. Misenheimer came to Charlotte in 1892, and Dr. Irwin says that he and Bob used to fight chickens in "Mise's" back yard, so this was the origin of the private hospital. Dr. "Mise," as he is affectionately called, is our balance wheel, never goes off on a tangent, and is one of our most successful physicians. Robert Gibbon is one of our best and most congenial surgeons. The two former are aged in years, yet youthful in appearance and are still active in practice, and, barring an accident, which we hope will not occur, are likely to be our medical Methuselahs.

The Presbyterian Hospital

The Presbyterian Hospital of Charlotte, North Carolina, was organized in January, 1903. The equipment and good-will were purchased from Drs. Irwin, Gibbon and Misenheimer, who were operating a small hospital at the rear of the Selwyn Hotel. The purchase was made possible by Dr. J. P. Munroe, president of the North Carolina Medical College, along with nine other members of the faculty: Drs. R. L. Gibbon, J. R. Irwin, A. J. Crowell, I. W. Faison, C. A. Misenheimer, E. R. Russell, C. H. Mills, C. M. Strong, and W. O. Nisbet. The faculty of the college then presented the hospital to the Presbyterian churches of the city, and the following trustees were appointed: Dr. J. P. Munroe, president; Dr. R. L. Gibbon, Dr. J. R. Irwin, Dr. A. J. Crowell, Dr. C. B. Stephenson, Mr. E. T. Cansler and Mr. William Anderson.

In April, 1903, the Arlington Hotel was leased. The North Carolina Medical College occupied a large part of the first floor, leaving space for about forty-five beds for hospital use. The women's ward was

Presbyterian Hospital

furnished by the women of the First Presbyterian Church as a memorial to Dr. Preston, a former pastor of that church, and the men's ward was furnished by St. Paul's Presbyterian Church.

In 1905, Dr. J. R. Alexander was made first active manager, which position he held until June, 1923. Under his management, the hospital was greatly expanded.

In 1917, the Elizabeth College property was purchased, the hospital was opened, and patients were moved in on February 28, 1918.

In June, 1923, Mr. W. E. Price, then the president of the board of trustees, took active charge. He rendered fine service until January 1, 1924, when Rev.

C. C. Beam was elected superintendent-treasurer, and, under his efficient management, the hospital can accommodate over a hundred patients, is fully furnished with every modern equipment necessary for the best of work, and is recognized as such by the American College of Surgeons.

The medical staff consists of some thirty physicians on the active staff, and fifty on the visiting staff. Space will not permit listing the names of the staff members.

The hospital is proud of the contribution it has been able to make to the poor. Since its organization, it has gradually increased its charity work, until, during the year 1928, its charity cost nearly $27,000.00. During the year the gifts for charity amounted to $14,000.00, leaving $13,000.00 given out of the earnings of the hospital.

The Charlotte Sanatorium

The Charlotte Sanatorium, privately owned and operated, was organized in 1907. D. A. Thompkins, the South's great industrial builder, was its first president.

The sanatorium is located on the corner of East Seventh and Church streets. Two additions have been made to the building, which, at present, has one hundred rooms. It is of fire-proof construction and is well equipped in all departments, and is operated by an executive board of three.

There is a training school of fifty pupils, and the institution is complete in a new modern obstetrical department. The hospital has recently been equipped

Charlotte Sanatorium

with an X-ray department second to none in this section. Up-to-date laboratory and hydrotherapy departments are maintained by the hospital. It is an accredited "A" grade hospital, and is manned by a coterie of specialists of recognized ability. The Charlotte Sanatorium stands out as one of the great institutions of its kind.

The Mercy Hospital

Twenty-three years ago, a small frame building on East First Street afforded a refuge for its share of sufferers, in and about Charlotte, North Carolina, where the Sisters of Mercy conducted their first hospital. The work developed rapidly, and soon necessitated new quarters and a larger building. With heroic efforts on the part of the Sisters, together with the assistance of loyal friends, the present institution was erected and equipped. The building, which is fireproof, modern in every way, is situated at the corner of Fifth Street and Caswell Road, surrounded by most attractive and well-kept lawns. It has a bed capacity of seventy, with equipment for medical, surgical and maternity care of the highest type, in recognition of which the hospital has enjoyed the endorsement of the American College of Surgeons for many years.

From its origin, the hospital has been operated upon very lofty plans of service to all, regardless of creed or social status, and stands ready at all times to dispense charity and aid whenever called upon. Again the work has outgrown the buildings, and plans are in progress for the erection of a four-story addition, which will consist of increased capacity in the

present departments with addition of an outdoor emergency and pre-natal clinic.

The Duke Endowment, which has given one dollar per day toward the care of each charity patient in

Mercy Hospital

this hospital, for the past four years, stands ready to aid in the erection of this new wing when the Sisters will have secured sufficient funds to begin the work.

The hospital staff is composed of esteemed members of the Mecklenburg Medical Association. A high standard of nursing service is given to all patients, and here young women of more than the usual type are trained in the art of nursing in a three-year course, in the School of Nursing attached to this hospital.

The nurses' home, which was opened six years ago, is separated from the hospital, is a beautiful fireproof building, and is furnished and equipped with

an aim to the happiness and comfort of these young women, all of whom come from most refined and comfortable homes.

St. Peter's Hospital

Our oldest hospital was organized by the Church Aid Society of St. Peter's Episcopal Church in 1876. The prime movers were Mrs. Jane R. Wilkes, Mr. H. C. Jones and Mrs. Ralph Van Landingham.

It began in two rooms on East Seventh Street and the first two patients were a Methodist and a Baptist, thus showing at its inception an altruistic spirit, which it has always manifested. Outgrowing these quarters, the hospital was moved to North Tryon Street (where the First Baptist Church is now located); then, in 1877, to Seventh Street; later, on account of economy, to a small house on North Graham Street; and, to Seventh Street again.

In June, 1877, a small building was erected on Church and Sixth streets—its present site. It was called the "Home and Hospital," but, in 1895, was changed to St. Peter's Hospital, and a training school was established.

In 1882, an addition was made, making it a ten-bed hospital. In 1898, a third addition was made, bringing is up to thirty beds. And, in 1923, practically a new hospital was built. In 1928, other extensive improvements were made, making it a modernly equipped hospital of seventy-five beds, twenty-five of which are devoted to charity, and last year more than $12,000.00 was expended for this work.

St. Peter's Hospital has a training school of forty, and a graduate staff of eight nurses. Its medical staff consists of the leading physicians and specialists of our city, and is rated as an A-1 institution.

In reviewing its early struggles, we cannot but admire and marvel at the sacrificial work of its

ST. PETERS HOSPITAL

founders. In the two institutions, St. Peter's and the Good Samaritan Hospitals, we see the same guiding hands and spirits. These institutions for a long time were the sole dependence for the relief of our sick and no one can gainsay that they have not been that, and that old St. Peter exemplifies the truth of its motto: "A Hospital With a Soul."

In addition to the loyal support of the Episcopal Church as liberal contributors, Mr. J. H. Cutter, Mr. W. A. Erwin, and Mrs. Hamilton Jones have liber

ally contributed to its support by showing their faith by their works.

The Charlotte Eye, Ear and Throat Hospital

The Charlotte Eye, Ear and Throat organization had its inception after the World War. There were only two members of the organization at its beginning in 1918, Dr. J. P. Matheson and Dr. C. N. Peeler.

The work continued to grow and they conceived the idea of building an up-to-date, modernly-equipped, special hospital, adequate to take care of the whole field of opthalmology, oto-laryngology, and endoscopy. The new hospital was opened in May, 1923. The work has increased until, at the present time, the staff consists of six members: Dr. J. P. Matheson, Dr. C. N. Peeler, Dr. H. L. Sloan, Dr. F. E. Motley, Dr. F. C. Smith, and Dr. V. K. Hart. The hospital is well equipped with an X-ray department and laboratory.

The hospital is built of reinforced steel and concrete, with twenty-three hospital beds. There are four stories. The fourth story is an enclosed roof garden for the comfort of convalescing patients; the first story is taken up entirely by offices of the staff and waiting room, and the second and third stories consist of the bed rooms and the operating rooms. It is an accredited "A" hospital, architecturally beautiful and an institution which the profession and citizenship of Mecklenburg County point out with pride and as an evidence of our progressiveness.

Charlotte Eye, Ear and Throat Hospital

The Good Samaritan Hospital

The origin dates back to 1881, by the women of St. Peter's Episcopal Church, under the leadership of Mrs. Jane Renwick Wilkes. Its first home was a very modest four-room house and, in 1888, a brick building was erected on West Hill Street, with accom-

Good Samaritan Hospital

modations for twenty patients, but was not fully equipped until 1891 on account of lack of funds, which were raised principally by Mrs. Wilkes.

At first, the colored people were not favorable toward it and were almost forced to enter for treatment. This prejudice and fear gradually disappeared when they saw its necessity, and they have increasingly given it their patronage and financial support.

In 1925, a modern addition was built, which more than doubled its capacity. This was made possible by the beneficence of J. B. Duke, W. R. Bier, the

colored churches, and friends. Today, it is a well-equipped, fifty-five-bed hospital and training school for nurses.

Its staff is composed of some of the leading physicians of both the white and colored races.

It is of interest to know that it was the first hospital exclusively for the colored race in the South, also, that no hospital has done as much work with so little funds and, therefore, it appeals to our citizenship as one of our most worthy philanthropies.

It stands as an outward and inward sign of the good-will and friendship between the races.

The present board of managers are: (St. Peter's Church.)

Mesdames George Wadsworth, president; M. M. Murphy, vice-president; J. S. Gaul, secretary; Miss Emma Hall, treasurer.

Mesdames Hamilton C. Jones, Sr., R. C. Marshall, W. H. Graham, Minta Jones Hull, W. H. Avant, Joseph Garibaldi.

These women are worthy successors of those who founded this hospital, who serve only for the pleasure of serving and together with the mission of the hospital embody the spirit of the Good Samaritan.

Tuberculosis Hospital

This institution is ideally situated on a wooded, sandy ridge at Huntersville, is of modern construction and equipment, and is doing a long-neglected work. It was built by a bond issue of five cents on one hundred dollars property valuation, and was opened in September, 1926, under the direction of the board of county commissioners and directorate, with

Mecklenburg Sanatorium

Dr. John Donnelly, its present head, being its first and only medical and general superintendent . This management has shown the wisdom of their choice.

There are three buildings: one large, central building for the administration and housing of adult white patients; a separate one for the colored, and a third for children. The latter, recently finished and opened, was made possible by the Duke Hospital Foundation, and is one of many monuments of J. B. Duke's foresighted philanthropies in the Carolinas. There is a total capacity of one hundred twenty beds, including twenty-five for colored, and forty for children, and, almost from the first, all beds have been occupied.

Up until September 1, 1929, five hundred twenty-two cases had been handled, with ninety arrested cases. Five years is considered the test. This shows about the average per cent of arrested cases. The number shows a gradual increase because earlier cases are being recognized, the prejudices are wearing down, and the public is better educated as to the advantages to the patient and protection to others when given institutional care.

Dr. Donnelly devotes two days a week to the attendance of county and city clinics in Charlotte, a clearing house, as over sixty-five per cent of the cases are sent from there.

There is needed, at present, an assistant medical superintendent and a separate building for the treatment of advanced cases, and, soon, there will be needed larger space for patients.

Many cases come for diagnosis and many are dormant home cases, who cannot get beds, or are not menaces to others. This institution has always been supported by the medical fraternity and has lifted a great responsibility from their shoulders. It is of untold benefit to the public and is one of the best means of stamping out the great white plague.

Ashe-Faison Children's Hospital

Branch: Pediatrics.

Date organized: September, 1928.

Personnel: Dr. John R. Ashe, pediatrician; Dr. Yates W. Faison, pediatrician; Dr. E. K. McLean, pediatrician; Dr. R. A. Moore, pediatrician.

The hospital is well equipped with X-ray laboratory, and light therapy department. Has graduate nurses only. It has already proven that it fills a long-felt want for more proficient work.

We are beginning to realize that many of the breakdowns in later years have their beginnings in childhood, and no pains should be spared in laying a foundation for the future health and efficiency of our citizenry.

CLINICS, OR GROUP MEDICINE

CLINICS, or group medicine, in this country are of recent origin and their growth has been rapid, and this county has kept abreast in this respect. The pro and con of their efficiency is debatable and, recognizing that much could be said on both sides as to the need of their existence, we are not here concerned. The fact remains that they are on the increase and are accepted by the majority of the profession and laity: this must mean a progressive step.

We are assuming a clinic to mean the association of two or more physicians to practice, embracing the whole or part of the branches of medicine.

Austin Clinic

Organized in 1919. Specialists: Proctology, urology, dermatology and roentgenology.

Personnel: Fred D. Austin, M. D.; Dewitt R. Austin, M. D.

Crowell Clinic

Branches: Urology and dermatology.

Organized: January 1, 1919. One of the oldest and largest in the South.

Personnel: Dr. A. J. Crowell, urologist; Dr. Raymond Thompson, urologist; Dr. J. A. Elliott, dermatologist; Dr. L. C. Todd, clinical pathologist; Dr. C. B. Squires, urologist; Drs. Lafferty and Phillips, roentgenologists.

McKay & McKay

Branch: Urology exclusively.

Date organized: September 1, 1928.

Personnel: Dr. Hamilton W. McKay, urologist; Dr. Robert W. McKay, urologist.

Munroe Clinic

Branch: Neurology, internal medicine and surgery.

Date organized: October, 1925.

Personnel: Dr. John P. Munroe, neurology and internal medicine; Dr. E. J. Wannamaker, Jr., internal medicine; Dr. H. Stokes Munroe, surgery.

The Nalle Clinic

Organized by Dr. Brodie C. Nalle, 1919, in McKinnon Building, removed to Professional Building in 1923 and in 1928 to its own specially built building on North Church Street—the first and only one built in the city. It is ideally arranged and equipped for its purpose to cover the general practice by group medicine.

Dr. J. H. Caldwell died August 17, 1928, after a long-standing, patiently-borne illness.

The personnel of the clinic as now constituted consist of: Dr. B. C. Nalle, gynecology and obstetrics; Dr. E. R. Hipp, general and industrial surgery; Dr. L. G. Gage, neurology and internal medicine; Dr. G. D. McGregor, neurology and internal medicine; Dr. L. W. Kelly, gastro-interology and internal medicine.

Consulting staff: Dr. H. P. Barret, clinical laboratory; Dr. R. H. Lafferty and Dr. C. C. Phillips, X-ray.

NALLE CLINIC

Shull & Fetner

Branch: Roentgenology.

Date organized: October, 1928.

Personnel: Dr. J. Rush Shull, roentgenologist; Dr. L. M. Fetner, roentgenologist.

Strong Clinic

General: No. 2 Medical Building.

Organized: 1924.

Surgery, gynecology, obstetric.

Majors in gynecology and obstetrics.

Personnel: Dr. Charles M. Strong, Dr. Oren Moore, Dr. J. L. Ranson.

MEDICAL INSTITUTIONS AND ALLIED ACTIVITIES

Medical Journals

AS ONE of the evidences of Mecklenburg's leadership along medical lines is the fact that she has had a medical journal (at one time, two) ever since 1892.

The first recorded medical journal in North Carolina was in 1856, embryonic evidently, as it was only casually mentioned and never went to full term, probably on account of the Civil War.

In 1878, Dr. Thomas Manning Wood published and edited the "North Carolina Medical Journal" at Wilmington, continuing it until his death in 1892, at which time Dr. Robert D. Jewett, also of Wilmington, and Dr. J. Allison Hodges of Fayetteville, kept it in circulation. Later, Dr. Jewett moved the journal to Winston-Salem, Dr. Hodges going to Richmond, Virginia, about this time.

In 1899, the journal was sold by Dr. Jewett to Drs. W. H. Wakefield, Robert L. Gibbon, and W. O. Nisbet of Charlotte, where it was published and edited, principally by Dr. Wakefield, its name being changed to the "Carolina Medical Journal."

In 1892, Dr. E. C. Register published the "Charlotte Medical Journal," thus we had two medical journals. Dr. Register, however, consolidated both under the name of the "Charlotte Medical Journal," which was continued with Dr. J. C. Montgomery and him-

self as co-editors, up until the time of Dr. Register's death in 1920, when the journal was taken over by Dr. Townsend and Dr. J. C. Montgomery, its name being changed at that time to "Southern Medicine and Surgery," its present name.

In December, 1924, Dr. James T. Northington bought the journal and he is its present owner and publisher. Thus it will be seen that this section of our Southland has had a representative medical journal, which expresses all that is best in medical literature for its peculiar local needs.

"Southern Medicine and Surgery," under the able editorship of Dr. James T. Northington, has broadened the scope of its influence, is pronounced by its readers as one of our best medical periodicals, and we esteem it as one of our medical assets. This journal is the official organ of the North and South Carolina and Virginia (Tri-State) and the North Carolina Medical Societies.

PROFESSIONAL BUILDING

T HAS been proven advantageous to both the patients and physicians for the latter to concentrate their activities where different specialists and the necessary adjuncts of X-ray, laboratories, etc., can be used. The latter would prove very costly if each physician had to have individual outfits. Charlotte, for its size, has in the Professional Building, corner of Tryon and Seventh streets, an institution worthy of our profession and citizenship—built to suit each occupant and representing the latest up-to-date arrangement. It was built on the co-operative plan of physicians and dentists, and Mr. Julian Little, banker and the present treasurer, did more than any other man to make it successful.

The building and lot cost $360,000.00, and contains two hundred seven offices.

On the top floor (the eighth), the meeting hall of the Mecklenburg County Medical Society is ideally located and is furnished and equipped with the necessary machinery for demonstrations.

Here, also, is located the Physicians' Library. The Medical Library started in 1909, as an exchange of journals between Drs. T. H. Wright, W. D. Witherbee, R. H. Lafferty, C. N. Peeler and William Allan. In a short time, this led to the formation of a Library Club with about twenty-five members, and, during the last twenty years, has gradually grown into the Charlotte Medical Library Association.

At the present writing, the library subscribes to sixty-seven current journals and there are, on the shelves, bound volumes of ninety-three different publications. The total number of volumes catalogued

PROFESSIONAL BUILDING

to date is eighteen hundred, made up of several hundred textbooks and monographs, the remainder being bound volumes of journals. During the current year, reference work has been taken care of for forty members and, for several of these, more than once. The files of about half of our journals cover a period of twenty years, and the remainder average from ten to fifteen years, so that they permit of valuable reference work. This is supplemented by loans from Surgeon General's Library.

Interior View, Medical Library

MEDICAL BUILDING

BECAUSE of the difficulty encountered in securing office space after the World War and also in order to reduce overhead expense and secure more active co-operation, the Old Lamb's Club building was bought in 1920 and the apartments converted into offices by Drs. C. M. Strong, Oren Moore, W. M. Hunter, J. R. Ashe, J. M. Northington, R. F. Leinbach, and William Allen.

A laboratory for the building was established under the direction of Dr. Harvey P. Barret. Although there have been various moves into and out of this building since that time, it is still serving as a comfortable medical home.

THE NORTH CAROLINA MEDICAL COLLEGE

Robert M. Lafferty, M.D.

THE North Carolina Medical College, the institution which did more than any other agency toward making Charlotte and Mecklenburg County the medical center that it is, was organized at Davidson College, 1886, by Dr. Paul B. Barringer, as a preparatory school of medicine, with a one-year curriculum. In 1889, when Dr. Munroe took charge, the curriculum was enlarged and a two-year course was given. During this year, Dr. George W. Graham of Charlotte, delivered a course of lectures on eye, ear, nose and throat. In 1893, the school was incorporated as the North Carolina Medical College, the course increased to three terms and all branches conforming with the requirements of that time were taught. Dr. J. P. Munroe, Dr. J. J. Dupuy and Rev. A. T. Graham, D.D., constituted the board of control. The faculty consisted of Dr. Munroe, Col. W. J. Martin, Dr. H. L. Smith and Dr. E. Q. Houston.

The first commencement was held May 11, 1894, and the following men were graduated: E. M. McCoy, H. C. Menzies, T. W. Mott, T. A. Norment, Jr., G. S. Tennent, H. T. Pope, Jr., and W. H. Wooten. In 1895, Dr. W. J. Martin succeeded his father, Col. W. J. Martin, and two men graduated, Goode Cheatham and Nat C. Daniels. In May, 1896, the graduates were H. B. Hoyle and E. M. Hutchens.

In the fall of 1897, the new building located across Concord Street from the Presbyterian Church was

completed and Dr. H. B. Hoyle was added to the faculty as professor of materia medica. Three student instructors were added this year. There were forty-one matriculated and two graduates again this year. In the early days of the school, quizes were held each spring in preparation for the state board, and many hundred graduates of other colleges matriculated for this course.

In 1900, we find, Dr. W. H. Wooten was added to the faculty as professor of clinical medicine. This year a hospital was first associated with the college. We find seven graduates. Dr. J. Howell Way delivered the commencement address. Rev. C. A. Munroe succeeded Dr. Dupuy on the board of control. In 1901, Dr. G. M. Maxwell was added to the faculty as professor of materia medica and histology. Dr. Hoyle moved to Monroe, N. C. This year the alumni association was organized and the new hospital building was dedicated.

In 1902, Dr. J. M. Douglas succeeded Dr. Smith as professor of physics and medical electricity, and the following Charlotte physicians formed the first Charlotte group, who, during the last half of the senior year, gave clinics and held class on the ground floor of the old Presbyterian Hospital, corner of West Trade and Mint streets: Drs. I. W. Faison, W. O. Nisbet, J. R. Irwin, E. R. Russell, C. M. Strong, C. H. C. Mills, R. L. Gibbon, A. J. Crowell, W. H. Wakefield, and J. P. Matheson.

In 1903, the free clinics in hospitals and dispensaries were begun in Charlotte. The Presbyterian Hospital was used for the whites, and the Good

Samaritan Hospital for the colored. The registration this year showed eighty-three students and there were seventeen graduates.

In the year 1905, new names appear in the list of the Charlotte faculty, viz.: Drs. C. A. Misenheimer, F. M. Winchester, R. E. Mason, and B. S. Moore. This year there were twenty-six graduates and Dr. W. G. Wylie of New York delivered the commencement address. This year the entire senior year was spent in Charlotte, followed by a one month's quiz at Davidson after this session closed. On April 3, 1906, the last class was graduated in Davidson, consisting of twenty-four men. Ninety-three students were enrolled. This year the Charlotte faculty became equal owners with Dr. Munroe, and October 2, 1907, all departments moved to Charlotte, occupying a splendid new building on the corner of North Church and Sixth streets, and the following were added to the faculty: Drs. E. C. Register, B. C. Nalle, G. W. Pressly, W. D. Witherbee, C. N. Peeler, R. H. Lafferty, L. B. Newell, P. M. King, J. R. Alexander, William Strong, E. W. Currie, C. S. McLaughlin, William Allan, John Donnelly, Myers Hunter and E. C. Boyette.

In 1909 and 1910, we find J. C. Montgomery, R. F. Leinbach, J. K. Ross, A. M. Whisnant and S. M. Crowell added to the faculty. There were 107 matriculates and fourteen graduates. In 1911 and 1912, the following were added to the faculty: J. Q. Myers and Hon. John W. Hutchison, and Hon. F. L. Black on medical jurisprudence; J. W. Squires, H. W. McKay,

W. R. Engle, F. D. Austin, Yates W. Faison, Oren Moore and O. B. Ross.

In May, 1912, Dr. Portia M. McKnight received her degree, being the first woman to graduate from this college. She passed the state board with honor and during the following year was added to the faculty as clinical instructress in practice of medicine. Later she married Prof. Alexis Lubchenko and went to Russia to live. Here she took another degree in medicine in order to be able to practice there. Barely escaping with her life and family, at the time of the revolution, she has since practiced in South Carolina.

A bulletin of the college, issued in April, 1910, shows that during the three months preceding, 1,500 cases were treated in the dispensary and accompanying this report was a list of the daily cases for March, which showed a wonderful variety.

The educational authorities raised the education endowment requirements faster than the owners of the college could comply, so rather than continue a college with a low rating, the college in 1915 merged with the Medical College of Virginia, in Richmond. Three classes were transferred almost as a unit to Richmond. The regular work was given there and degrees conferred by the North Carolina Medical College until all the matriculates had graduated. And so the North Carolina Medical College, after more than twenty years, passed into history, having given to the state and county a large number of physicians, most of whom became leaders in their communities.

HEALTH DEPARTMENT

W. A. McPhaul

THE Health Department proper was organized during the World War by Major Brown, who was in charge of the sanitation at Camp Green.

Dr. C. C. Hudson was the first health officer, and he continued the work after the close of the war. Dr. Hudson's staff consisted of a stenographer, part-time milk inspector, part-time laboratory technician, food inspector, part-time clinician, one sanitary inspector and three nurses, who were furnished by the Good Fellow's Club and Woman's Club. At that time the venereal disease clinic was operated by the Crowell Clinic in the afternoons, in the Realty Building.

Today, we have a personnel of forty-seven, which includes the school health department, composed of a physician and six nurses; the county health department, composed of a physician and five nurses; several physicians and consultants furnished by the civic organizations, namely, Civitan Club, Rotary Club, and volunteer service. The personnel of the city health department proper is thirty-three, consisting of health officer, three stenographers, supervisor of nurses, seventeen nurses, laboratory technician, clinician, two milk inspectors, one veterinarian in charge of fresh meat inspection, one quarantine officer, food inspector, three sanitary inspectors.

The appropriation has increased from about $15,000.00 to $40,000.00 in the past ten years for the City of Charlotte. The total appropriation includes

money from outside agencies, such as the Woman's Club, Civitan Club, School Board, Co-operative Nursing Association, etc., totaling approximately $80,000.00. Including the county health department, it would total approximately $100,000.00.

The outstanding things accomplished by the health department in the past ten years has been the adoption of standard milk ordinance and its enforcement; guaranteeing to the citizens of Charlotte a safe grade of milk; adoption and enforcement of an ordinance requiring all fresh meats to be examined, inspected and passed before entering the markets; the establishing of sick and well baby clinics to lower our infant death rate; the enlargement of our nursing service; and the general clinic which gives over 10,000 treatments a year to people who are not able to pay for same.

(Dr. W. A. McPhaul and Dr. E. H. Hand were elected superintendent and assistant superintendent of health in 1920. Both have and are still carrying on this work with a zeal and efficiency to the universal satisfaction of the public and the medical profession, and the cause of public health will never lag with such men at its helm. Editor).

COUNTY PHYSICIANS

OFFICE of the county physician was not an elective one prior to Dr. Bratton's incumbency, which was in the 80's (date not obtainable). Prior to this, it seems that the sheriff or coroner could call upon any physician to act on county matters at a per diem, or visit free, and he had no special duties.

Thus it seems that Dr. Bratton was the first one elected, and the position was created by the county commissioners. He served several terms and was succeeded by Dr. H. W. Wilder, who served acceptably up to 1896. During this time the election was put in the hands of the physicians, which did not prove satisfactory because of the political wrangles and personal animosities engendered. The old men of the profession can recall an election held at the old courthouse, where the Selwyn Hotel is now located, when Dr. H. M. Wilder and Dr. J. C. Montgomery were candidates. These occasions usually were the only times which brought out a one hundred per cent attendance. Dr. Wilder was elected and, after his acceptance speech, Dr. Montgomery, the defeated candidate, was called for. Among other things, he said: "I'm glad I ran for this office, for I've found out how many d—— liars there are among the doctors—for two-thirds of them had promised to support me." The election of the office was put back into the hands of the county commissioners, where it properly belonged.

In 1896, Dr. C. M. Strong was elected. He held the office for two terms. Dr. F. M. Winchester

held the office for four years, when in 1904 Dr. Calvin McLaughlin was chosen and, up to the present time, has continuously held the office and will likely do so as long as he cares to serve. This speaks for itself, of the esteem in which he is held by the authorities and for his efficiency in this office.

It was in 1896, owing to the severe smallpox epidemic, that the office of "city physician" was added, which Dr. H. O. Hawley held until his death, when it was abolished to merge into the present board of health. There are many who think that this office should be restored, as one of the duties is to look after the home-confined indigent sick of the city, who are not reached, now, by the present system.

One of the most unpleasant duties, formerly, of the county physician was to be present at the execution of criminals and to pronounce them dead. The writer recalls the clamorous demands by certain morbid curious citizens for tickets, of which each official was allowed a certain number. The writer had to be present at four of these executions, and witness the gruesome contortions of the victims by strangulation, for all cases were examined post mortem and none were found to have their necks broken; it took, on an average, about ten minutes for death to occur.

This mode of death has been more humanized by electricity, and the curious are now barred. It seems that a still more humane method would be by lethal gas preceded by twilight sleep. Only those who have seen these executions can have any idea of that inde-

scribable expression, especially during the preliminaries, which comes over the poor wretch's face.

The main objections we found in this office were the multitude of duties required, with such a minimum salary in remuneration. However, in this age of good roads and automobiles, some of its hardships have been mitigated and many of its duties have been assumed by the county board of health.

SMALLPOX EPIDEMIC—1896 to 1900

LEST WE FORGET." In 1896, we had a severe smallpox epidemic. We had become callous about our protection against these visitations, not having had any smallpox since the sixties, had neglected vaccination so that when the epidemic came, it found a fertile field and produced a real panic. The only thing that stopped it was a universal vaccination. The writer was superintendent of health at that time and was himself unvaccinated and had to face the situation with a great many misgivings until his dose took. We had something like 1,500 cases and 100 or more deaths, and its mark was left on many others. It was necessary to segregate camps (tents) for the victims and the suspects.

The writer and chief of police, William Orr, had the brunt of the attack to bear. The latter is deserving of a Congressional Medal not only for the heroic part he played during this trying time, but throughout his public career. No official has stood higher in the estimation of our citizens than the alert, brave yet sympathetic and lovable Chief Orr.

Together we were called to see the first case that had fallen by the wayside—six miles from town—and there we found him a veritable Job. The next morning's paper made note of the case and stated: "Dr. Strong and Chief Orr were called to see a case of suspected smallpox, an old colored man found on the Statesville Road, and, Dr. Strong, after examining his pulse with a pair of tongs and looking at him with a spy glass, pronounced it smallpox," and, in this, there was a semblance of truth.

The opposition to compulsory vaccination was violent at first, but the firm hand of the law and its rapid spread soon overcame the resistance. Many of the first cases had the confluent type developing haematuria and rapidly succumbing to uremia. Vaccination in the first stages apparently modified complication and course of the disease.

The writer had charge of the camps and Dr. F. O. Hawley was appointed city physician and looked after the sending out of patients. At first the writer was ostracised by the public, was asked not to attend the church services and, was given a wide berth on the streets. Being consumed with ennui, he once slipped into the back seat of a theatre and, presently, when the lights were switched on during an intermission, was surprised to find himself the sole occupant of a number of back seats! After that experience, he went into solitary confinement with only his books and pipe and a faithful dog which had wandered into the camp—since which time, he has been a friend of man's best friend, the dog.

A Mr. Pruette, a Civil War veteran, was the only smallpox immune we could get and saved the day until we could graduate other patients.

Dr. McCombs had a colored driver, "Ed," who got drunk and vounteered to bury the first victim. The doctor had the police to escort him to Briar Creek and, in the presence of a mixed approving gallery, lining up at a safe distance, had Ed to break the ice and take a cleansing bath, a la Haiman, without even a modern bathing suit.

INFLUENZA

As a matter of record and interest, the great epidemic of influenza during the winter of 1918-1919 should be noted. Mecklenburg, along with the rest of the world, suffered from one of the worst scourges it has ever known. Its sweep was coextensive with humanity, with no respect to age, person or clime. If it had any preference, seemingly it was for the robust and for those in the prime of life. Its onset was sudden and overwhelming, often claiming its victims within twenty-four hours.

Its advance was like the first advance of the Teutonic Horde—marched steadily forward until it captured its every objective. Its pathological cause has never been definitely known; some virulent germ of the influenza bacillus type probably aided and abetted by streptococcus hemolyticus, also by the worst winter on record here, and coming at the height of the World War, with its multiplied psychoses, found a fertile field. Its devastating work among the soldiers at the front and cantonments in our own country was indescribable, and the wonder is that this, in itself, did not end the war.

Our own civilian population suffered the same and were handicapped by the scarcity of doctors, nurses and hospitals to a greater degree than the soldiers. The civilian doctors were swamped with work and, during the height of the siege, often made over one hundred calls a day. This made it impossible to keep any accounts, consequently it was largely a work of charity.

Owing to a disorganized health department, no record of the number of cases or death rate was kept. Hence, the toll exacted will never be definitely known. Based upon a population of 80,000, fifty per cent., or 40,000, more or less, were infected, and a conservative three per cent death rate would place its mortality at 1,200—not to speak of its morbidity and sequelae, which are still present, eleven years afterward.

Camp Greene cantonment, with from forty to sixty thousands troops, added to the horrors. There were so many deaths that the undertakers were swamped and, at one of these estabishments, sixty bodies were stacked up awaiting boxes for semblance of a funeral. The same condition was seen at our railway stations. To these gruesome sights, however, the public had a peculiar reaction: there was no panic, hysteria, and few tears, but, instead, a calm, unselfish devotion to duty which draws men together in every great crisis, and increases our faith in humanity.

Owing to the virulence of the infection and the frequency of pneumonia, which cut down the patients' resistance by a rapid decrease in both the number of red blood cells and haemoglobin, they became cyanotic (the laity called it "the blue death") which too often presaged the end.

There apparently was "no balm in Gilead" and, to many, "no physician there." During these trying times, our Mecklenburg doctors were true to their Hippocratic Oath. When the last roll is called and the plaudit, "Well done thou good and faithful servant" is spoken, we feel sure that these home veterans will be among the number.

DOCTOR GAGS

VOLTAIRE, the cynic, said: "The doctor's province is to amuse the patients, while nature effects their cure."

Even if this is only a partial truth, which we doctors are forced to admit, there must be some "funny doctors," and we have found them, as a whole, a jolly set of good fellows.

We attribute this to the routine drabness of their calling, which has largely to do with pain, sadness and often with the sordid side of life. If this phase of life is dwelt on too seriously, it tends to moroseness and melancholy, and, as a "safety valve," we enjoy hearing and telling jokes.

We have collected some of these jokes, indigenous to our own Mecklenburg doctors, free from banality, risqueness and which, in no way, reflect on their personal or professional character. Some of these jokes would lose their "kick" if the doctors' names were omitted and, with their full consent, we use personalities.

If the over-worked, tired, discouraged or sick doctor can turn to these pages and find there even a little smile, or a ray of sunshine which would make him happy for the moment, or "turn time back in its flight and make him a child again just for a night," we should feel that this moralizing was not in vain.

When the author read to Dr. Northington his flowery prologue, which attempted to prove the "doctor" a superior man and why, which he thought was pretty

nifty, Dr. Northington interrupted to say that his sympathy was always with the patient, and added: "Dream on, Uncle Charlie, dream on."

Perfectly Satisfactory Answer

To beware of prognosticating should be instilled into the younger doctors. We older ones can testify how often our prognosis goes awry. On the other hand, the patients' friends are often easily satisfied.

This is a sample of the usual answer given to anxious friends, especially when the case is an obscure one. A minister was present when the friends asked the consulting physician what he thought of the outcome of the case. In a dignified manner (which a consultant alone can assume) he replied: "The patient may get well, may linger a long time, or may pass out any minute."

The friends: "Thank you, doctor, we knew you would tell us the truth." The minister then added, "We can't equivocate like you, doctor."

No Nosis

Three country doctors, during the "good ole days," were in consultation on a stormy, snowy night in a room given over to them (where a big log fire burned brightly), together with some nectar which warms and cheers the inner man. As the night grew on, the nectar began to mellow the conversation. The men became reminiscent, especially two of the group, who had been college chums.

John: "Sam, you remember when we were in college we had a chair on diagnosis?"

Sam: "Yes, John, one on prognosis."

John (nodding): "Why didn't they have one on dam no nosis?"

Sam: "Hic! Wish they had—would have helped us all tonight."

Consultant to Dr. G.: "Did you find out anything more about the patient we saw last night?" (Diagnosis in doubt.)

Dr. G.: "Oh, yes! I found out that he had only enough money to pay me."

Doctors can always explain anything. In a scientific discussion among some of our jolly fellows about the whys and wherefores of prenatality, one of our "Will Rogers" was asked how he explained his big feet. Said he: "Oh yes! I was born feet-foremost."

This from one of our D.D.'s dedicated to the throat specialist. "I was in seminary with a preacher, who had had two years in medicine. When asked what he learned in that profession, he said: 'I learned that the body was supported by the legs, the head by the neck, and doctors by the tonsils.' "

One of our debonair bachelor doctors, during the time when automobiles were few and very uncertain means of travel, was pleasure driving with a charming Miss. Upon coming up East Trade Street, the animal commenced bucking and creeping along, to

the embarrassment of the Miss, and to the utter disgust of the doctor. This was on his mind as they met society on the street (for it was parade hour): "I know they are saying that owing to our slow progress, we are courting; so engrossed with each other that we don't see anyone else." When, as a matter of fact, the conversation was very strained:

She: "Think you can make it?"

He: "It's very doubtful—does not seem to pick up right, etc."

And, this was what he was saying to himself and his auto:

"I don't think you will or can make this hill, but if you don't, dam you! I will dynamite you so help me God."

A Reassuring Doctor

One of our esteemed, easy-going physicians upon being called in consultation was joyfully received by the patient threatened with an operation.

Said the patient to the doctor: "I am awfully glad to see you, and sent for you knowing that if you did no good, you would at least do no harm."

Not Practicing What They Preach

The "doctor" usually makes a poor patient. One reason, suggested by the laity, is because he realizes the often impotency of his remedies. He recoils vociferously from operations, as is shown in the case of one of our physicians who had brought many patients to a surgeon and then came, himself, with acute appendicitis. He was very perturbed and had pres-

ent at the operation an internist, a heart and lung specialist, and two anaesthetic specialists. After getting on the table, he cautioned them to watch him very carefully.

Surgeon: "Doctor, calm down! You recall how you reassure your patients that there is very little danger."

The Victim: "I know I did—but I know also that I was telling them a dam lie."

Consistency—Thou Art a Jewel

Says Dr. "W." (To a tonsil case on a busy day, after looking at her tonsils): "No, Madam, they don't need to come out."

Patient: "But doctor, my physician says they do."

Dr. "W." (Hurriedly): "Yes, yes, Madam, but don't you ever have them taken out!"

Later—visiting her own physician and getting worse, he insisted on the operation.

Going back to Dr. "W." on a day when practice was bum, the doctor, on examination, said to his patient: "Yes, they ought to come out right away. You ought to have had them out long ago!" (very positive).

A Convenient Malady

Doctors are versatile, especially on a rainy night! One of our doctors, on failing to respond to a night call, was upbraided by the patient the next day.

Patient: "Why did you not come last night, doctor?"

Doctor: "Didn't get the message."

Patient: "Why you answered the 'phone yourself!"

Doctor: "Oh, yes, I recall—er—just after I answered, I took one of my bad spells."

Patient: "What kind of spells do you have, doctor?"

Doctor: "Oh—er, they call it temporary amnesia —a very unusual and embarrassing disease."

Roughing It With a Patient Sometimes Pays

During the recent Confederate Veterans' Reunion in this city, at the temporary emergency hospital, one of our younger surgeons was on duty when an old veteran was brought in with an apparent strangulated hernia. The young surgeon was using gentle taxis, as taught, and was especially gentle in this veteran's case. After several ineffectual attempts to reduce the mass, the surgeon announced to the veteran that an operation would probably be necessary. To this the old veteran vehemently demurred. At this juncture, an old Confederate surgeon came in, and the young surgeon, in deference to him, explained the situation and asked the old doctor to examine the patient. This he did, and grasping the hernia with violent twisting motions, which brought out the rebel yell from the old soldier, bade him to shut up and quit breathing—the hernia flopped back. The old doctor nonchalantly walked out and remarked: "Doctor, you have to be rough with these old boys!"

Dr. J. G. Johnston: "I was coming down in an elevator of the Professional Building with a very homely man with a child, who had possibly been manhandled by some doctor. Upon reaching the next stop, Dr. Montgomery got on. Immediately the child began to scream. When he left the elevator, Dr. Johnson remarked to Dr. Montgomery: 'Your looks must have frightened that child.' Dr. Montgomery retorted: 'No that could not be true, for if he had ever looked good at his daddy, when he saw me, he would have killed himself laughing.'"

Dr. Montgomery—A Good Logical Collector

A poorly dressed patient came to Dr. Montgomery's office who had been cut in a brawl. While sewing him up, Dr. Montgomery took a mental inventory of what he could pay.

Patient: "What is the bill, doctor?"

Dr. Montgomery: "Oh, about two bucks, I guess."

Pulling out a roll of bills as big as his thigh, the patient peeled off two measley bucks. Later, when he came to have the stitches cut (silkworm gut, I judge), the patient again asked the amount of charge. "Ten dollars," was the prompt reply, and to justify this difference in the charges, Dr. Montgomery said: "Any fool can sew up a cut, but it takes a dinged-good one to cut the stitches."

Another, of Doctor's Own

Driving along the street, he noticed behind him a hearse. Upon turning the first corner, the hearse

followed. This was repeated several times, until finally the doctor stopped and said to the hearse driver: "Go on where you are going, I haven't killed anybody lately."

A new doctor in town was hurriedly called across the street to see a woman in labor. The husband said: "There is no one here but me, will you please watch my wife while I go for a doctor?" (This happened before the telephone age.)

Dr. Nalle requests that on his tombstone a telephone be chiseled with this inscription: "Killed by this."

A doctor had been treating for a long time the daughter of an indigent widow, gratis, with an obscure and interesting case. Have you ever noticed how interesting a case becomes when there is no money in it? The doctor had had numerous pop-consultations without apparent results. The mother sensed this and requested a certain prominent and positive surgeon, saying that she wished to pay him in order that he would take more interest in the case. After the consultation, she followed them to the gate, saying to Dr. M.: "What is the matter with my daughter? Please be honest about it." And he was. He said: "Darned if I know."

Going Too Deep

An out-of-town doctor sent an old ante-bellum negro to a well-known internist. After thumping and X-raying, the patient was sent to the hospital for

further study. This bewildered the old darkey and he took "French leave." Meeting the old negro shambling along the road, the doctor asked how he was.

Old Darkey: "Wusser, Bossman, wusser."

Doctor: "Did the city doctors do you any good?"

Old Darkey: "No, sah! To tell you the trufe, Boss, they went too deep for a poor ole ornery darkey like me."

A Striking Evidence of the Subconscious Mind

Operating upon a colored preacher: In the first stage of anaesthesia, he took a text and preached a stirring Methodist sermon on Moses leading the children of Israel out of Egypt to the Promised Land. Then, on deeper anaesthesia, when the conscious mind ceased and the subconscious began, he launched into bitter profanity. The next day upon asking what he said (as patients often do ask what they said and did under the influence of ether), we told him, and asked how he explained it. The old darkey replied: "The fudder I got under that Ephraim, the fudder back I went in my life." Adding, "You see, I cussed before I preached."

Safety First

An old colored man, in a hospital, upon being told that an operation was the only thing that would help him, asked if there was any danger. In reply, we said that we did not know, for we can't always tell. The old darkey looked wistfully to the ceiling in deep

meditation and then said: "You don't know, I don't know, God only knows, so I'm gwine home and leave it to Him."

Most Too Classy

All the older doctors know about the "old brick row" which was the breaking ground for all new doctors. Dr. E. C. Register, on coming to Charlotte, who drove two spanking horses, wore a silk hat, a long-tail coat—dressed as a dignified doctor should—and carried a large medical case, received a call to the "row." Tapping on the door, a frizzled mill hand stuck his head out of the partially open door and asked who was there. "Dr. Register," the doctor replied. Scanning him carefully, the man said: "We sent for Mr. O'McManahue (this was the composite name of two other physicians, O'Donoghue and McManaway) and we don't want no patent medicine man."

Visible Advertising

Before the day of automobiles, one of our energetic doctors was seen crossing Independence Square for a car transfer with an unfolded Kelly Pad in one hand and an unconcealed pair of long obstetrical forceps in the other. No board of censors then.

Dr. William Strong Advances a New Cure for Boils

A patient who had had boil after boil opened and treated, neglected to pay any attention to repeated

statements. Showing up after several months with another boil, he asked the doctor if he knew anything that would prevent them. The doctor told him that he might try paying the old bill. Patient never took the remedy.

Obscure Symptom Explained

Dr. Oren Moore called Dr. Leinbach into consultation to see a young lady with obscure symptoms.

Dr. Leinbach: "It is a rather puzzling case. Did you notice the large red splotches on her legs? How do you explain them?"

Dr. Moore: "Easy. She's been sitting too near the fire."

Accommodating Patient's Absent Treatment

One of our doctors, on answering a hurry, labor call, ran out of gas on the way. He went into a friend's house to 'phone for gas and to ask how the patient was coming along. On being told that she was having hard pains every five minutes, he said: "Tell her to hold up. I'll be there in fifteen minutes." On arrival, he found she had obeyed his order to the minute.

"PHYSICIAN HEAL THYSELF"

IN THE September, 1929, issue of Southern Medicine and Surgery, there is an article on "Periodic Examinations" by Fred R. Taylor, M.D., showing comparison of results upon physicians and a general group. The per cent of defects in the first group (physicians) was 4.49, while in the general group it was 3.57. In other words, the defects were twenty-five per cent greater among physicians. Results in 106 physicians examined were as follows:

	Cases	Percent
Refractive errors uncorrected	28	32.08
Dental infection (oral sepsis) all kinds	27	25.47
Obesity	25	23.58
Eczematoid ringworm or feet	21	19.81
Hemorrhoids	21	19.81
Work excessive hours of	21	19.81
Appendicitis, chronic	21	19.81
Prostatic hypertrophy	13	12.26
Varicose veins of legs	10	9.43
Malnutrition	10	9.43
Corns, severe	9	8.49
Tonsils infected	8	7.55
Gall bladder, chronic	8	7.55
Hernia, inguinal	7	6.60
Testicle, atrophy from mumps	7	6.60

This was a surprising and disconcerting statement and should cause the physicians to sit up and take notice.

He cites as causes: Neglect to consult and take treatment, excessive hours of work, loss of sleep, occu-

pational hazards of the practice of medicine, which are, in a measure, unavoidable.

Why do physicians presume on nature, or neglect to safeguard themselves by not doing the things they advise others to do?

The final results of these neglects are answered by reading the death list in A. M. A. Journal where causes of death of physicians are given and the number who succumb to cerebral hemorrhage and apoplexy, cardio vascular and renal disease, which are largely preventable.

From a layman's point of view: "Physician heal thyself," it is a reflection on the profession, but to the profession there is a bit of irony.

The remedy suggests itself: Avoid irregular eating and over-work, the latter is hard to do, yet you owe it to yourself, as well as your family and your patients. No one can do his best work when overfatigued, and the sick expect and demand your best. The same applies to sleep. You must have nature's sweet restorer, not the snorer; he should be put in a soundless room and turned over to the nose and throat specialist, by law if necessary; is he not a nuisance? Above all, be examined twice yearly. This is free and can be repaid in kind. Lastly, which is the hardest thing of all: follow advice and take treatment, not necessarily your own medicine. Try to reduce the above disparaging per cent. Wipe out the implied reflection on your profession and live out your expectancy, unless you expect too much.

The laity offers the best explanation as to why (and you have often heard it) the doctor does not com-

plain: "The doctor can't afford to be sick." They look with disfavor on the grunting doctor, but sympathize and lament when you are "big sick." So, doctor, when you want to rest, play "big sick."

Forbearance Ceased to Be a Virtue

In the "good ole days," when we were not pestered by the telephone, they sent for the "doctor" in the country, usually on a mule. One of our village doctors had been unsuccessful in collecting an old bill. In his last attempt, he wrathfully told the man he did not want him to ever come or send for him again, or it might not go well with him.

Later, on a certain bad night, the man, on his mule, halted at the doctor's gate.

"Hello," he yelled.

The doctor came to the door, saying, "Who's there?"

Promptly came the answer: "E. M."

Then the doctor: "I told you not to come for me again—you get away before I shoot."

The man commenced to expostulate about his wife being confined, etc. The doctor reached back, got his shotgun and blazed away. E. M. and mule made a hasty retreat. Another bang! And the retreat grew faster, so that soon the rider and mule disappeared from the scene. The racket, however, waked up the villagers, to wonder and ask what it was all about. The doctor, upon being questioned, answered: "This is one way I have of collecting bills." It is said his collections materially increased thereafterward.

Moral: We have tried all other means of collection, why not try this?

A Modern Tam o' Shanter

We have all laughed at that graphic episode of Tam and his mare, Meg, by Burns. Since an earlier experience, when a young country doctor, it does not seem so funny to me. We had to ride horseback in those days, especially in the winter months, and could often save distance by cutting through woods and fields.

On one stormy, dark night in March, after seeing a patient, we cut through an unfrequented path, which passed an old abandoned graveyard in which was buried a murderer. For this reason, together with our own innate superstitions and the legends of the colored people, it was a typical rendezvous for ghosts. These things made me have those cold creeps up my back and in spite of my philosophy to the contrary, I felt a little "skeered." My horse seemed to scent the uncanny surrounding, and ever and anon would shy. When in the midst of the graveyard, something white jumped out in front of us, which looked like a polar bear and it seemed to make a fiendish sound (whether this was the object, the horse, or me, it seemed to frighten both). In a calm moment, when reason began to work, I really think that it was an old graveyard rabbit. However, it accomplished its purpose. The horse took a lunge and an overspreading limb hit me in the face, knocking off my hat. Towards home the frightened horse ran, equaling, if not surpassing "Man o' War," to which I offered no

serious objection. True to tradition, I spat over my left shoulder and did not look back. Both the horse and I had the feeling of a perilous pursuit, and we breathed much easier when he was in his stable and I in my bed.

My alibi: Yes, the horse was badly "skeered." My indignation was so great I never went back for my hat and to show my contempt for such foolish fears, I scrupulously avoided going that route again at night.

We have been broadcasting over Station M. C. M. S. by the authority of A. M. A. over a radius of ten kilometers, have given you some facts, fancies and fun. It is now, at the sound of the musical note, exactly 9:59 and 59 seconds, Eastern Standard Time. The Carolina moon is rising and we are signing off. This is Charlie Strong announcing.

Good Luck! Good Night!

The End.

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